



## Request to Extend Expired Permit

OWNER INFORMATION			
First & Last Name		Phone Number	
Email Address			
PROJECT INFORMATION			
Street Address		<input type="checkbox"/> NE <input type="checkbox"/> NW <input type="checkbox"/> SE <input type="checkbox"/> SW	
Project LD or BB Number			
<b>Please provide a detailed explanation of why the permit has expired:</b>			
EXTENSION PERIOD			
<input type="checkbox"/> 30 days (Cost- \$110)			
<ul style="list-style-type: none"> <li>Has there been more than 365 days of inactivity? <input type="checkbox"/> Yes <input type="checkbox"/> No (If "Yes", the application cannot be reactivated, a new permit application is required.)</li> <li>If the extension is approved, you have three (3) business days to submit payment.</li> </ul>			
The extension period begins following the receipt of payment.			
<ul style="list-style-type: none"> <li><b>SIGNATURE</b></li> </ul>			
I, as the owner or the owner agent, affirm and swear that I am authorized to undertake the work that is subject to this permit application. I make this affirmation based on a diligent review of the plans and other documents related to this permit application and based on a diligent review of all applicable state and local laws, ordinances, building codes, and zoning codes that apply to this permit application.			
Owner's Signature		Date	
Owner Agent's Signature			
NOTARY INFORMATION		Date	
Sworn to and subscribed before me this _____ day of _____, 20____			
Notary Public Signature		Notary Stamp	
FOR OFFICE USE ONLY			
Extension Request: (Approval must be granted by Director or Assistant Director)		<input type="checkbox"/> Approved <input type="checkbox"/> Denied	
Decision Made By		Date	
Payment Confirmed By		Date	
Date Permit was reactivated			