Reset Form Print Form

PERMIT EXTENSION REQUEST

Building Department

Fax: 954-797-2273 / **Email:** helpmebuilding@plantation.org

Date: 2 _____

Re: Permit No. _____

Job Address _____, Plantation, FL

To Building Official,

I would like to request an extension of subject permit (and any related permits) for the following reason:

_____

_____

_____

I understand that if my request is approved, a fee of 50% of the original permit fee or the applicable minimum fee*, whichever is greater, will be due for all applicable permits. Said fee(s) shall be paid prior to the original permit expiration date in order to activate the extension for a period of ninety (90) days.

_____	_____
Contractor / Agent's Name (Print Name)	Owner's Name (Print Name)
_____	_____
Contractor / Agent's Signature	Owner's Signature
_____	_____
Requested By	E-mail / Fax

FOR OFFICE USE ONLY

Accepted By: _____ Expiration Date: _____

Previously Renewed: ☐ Yes ☐ No If Yes, when _____

☐ Approved ☐ Denied Comment: _____ Date: _____

Building Official/Authorized Representative: _____

Fee Amount: $ _____ Notification Sent: _____