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# PERMIT EXTENSION REQUEST

PUBLIC REQUEST FORM

DATE: _____
PERMIT NUMBER:
_____
PROJECT ADDRESS:
_____
_____

DESCRIPTION OF WORK:
_____
_____

OWNER'S NAME: _____
ADDRESS: _____
CITY: _____
PHONE: _____
REASON FOR EXTENSION:
_____
_____

PERSON REQUESTING EXTENSION:
_____

**********

DEPTARTMENTAL USE ONLY:
APPROVED [ ] DENIED [ ] DATE: _____
OFFICIAL SIGNATURE:
_____