



Phone: (661) 822-2200 Ext. 114 Email: permits@tehachapicityhall.com

APPLICATION FOR BUILDING PERMIT EXTENSION

Building Permit Nu	ımber:		
		Date:	
Project address:			
Reason for Extension	n:		
Requested Length of	of Extension:		
Contact Person:			
Name:			
Mailing address:			
City:	State:		Zip:
Phone Number:		Email:	
Property Owner:			
·-			
	State:		Zip:
	FOR OFFICIA		
□ Approved	New Expiration Date:		
□ Denied	Reason for denial:		
Building Official Signature		Date	