



## Permit Extension Request

OFFICE USE ONLY
Date Received:
Date Approved:

PERMIT INFORMATION		
Permit Number(s):		
Project Name:		
Address:		
CONTACT INFORMATION		
Business Name:		
Contact Name:		
Phone:		
Email:		
REASON FOR EXTENSION		
AUTHORIZED SIGNATURE		
Signature: _____		Date: _____
OFFICE USE ONLY		
<b>CURRENT PERMIT STATUS</b>		
<b>DATE OF LAST INSPECTION</b>		
<b>DATE OF PREVIOUS EXTENSION</b>		
<b>NEW EXPIRATION DATE</b>		
FEE INCREASE INFORMATION	CURRENT RATE	INCREASED RATE
PARKS SDC		
SEWER SDC		
TRANSPORTATION SDC		
WATER SDC		
METRO CET		
SCHOOL CET		
<b>TOTAL</b>		
<b>Prepared By:</b> _____		<b>Date:</b> _____

**Development Services & Permitting Center**