



# BUILDING PERMIT EXTENSION REQUEST

Applicant	
Site Address	
Building Permit (Folder) Number	
Building Permit Issuance Date	
Description of Construction	
Reason for Requesting Extension	

Requesting \_\_\_\_\_ month extension.

Registered Owner (Name): \_\_\_\_\_

<b>Signature of Registered of Owner:</b>	
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<i>Internal Use Only</i>
Extension Request Received Date: _____
Approved / Declined Date: _____
Expires: _____
Rob Goertzen Manager of Building and Inspections: _____

***This document may be submitted electronically to [building.department@chilliwack.com](mailto:building.department@chilliwack.com) or in person, Building Department, City of Chilliwack, 8550 Young Road, Chilliwack BC, V2P 8A4.***