

Building Permit Extension Request

Date Extension Request Received: _____

Date Permit originally issued: _____

Applicant: _____

Folder No.: _____

Civic Address: _____

Description of Construction: _____

Reason for requesting extension: _____

Requesting _____ month extension

Signature of Registered Owner

Approved/Declined this _____ day of _____, 20____.

Garrett Schipper
Manager of Technical Services

Expiry Date of Extension: _____