

## REQUEST FOR PERMIT EXTENSION

PERMIT NUMBER:	
SITE ADDRESS:	
OWNER NAME:	
DED IDC 105 5 EVDID ATION	
PER IBC, 105.5 EXPIRATION.  Every <i>permit</i> issued shall become invalid unless the work within 180 days after its issuance, or if the work authorize for a period of 180 days after the time the work is commer writing, one or more extensions of time, for periods not m in writing and justifiable cause demonstrated.	d on the site by such <i>permit</i> is suspended or abandoned need. The <i>building official</i> is authorized to grant, in
Please explain the reason for the extension request and i	return via the email you received it from.
Name/Role (Applicant, Contractor, etc.)	Date