



Building Division

**PERMIT EXTENSION REQUEST**

**180-Days for Permit in Issued Status**

Date: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Extension of Permit Number: \_\_\_\_\_

Permit Expiration Date: \_\_\_\_\_

Jobsite Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

To Whom It May Concern:

This letter is to request a **180 day extension** on the above referenced permit number for the following reasons:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signer \_\_\_\_\_

(Signature of Qualifier, Owner-Builder or Owner-Builder's Agent)

**STATE OF FLORIDA**

**COUNTY OF BROWARD**

Sworn to and subscribe before me on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

By: \_\_\_\_\_

**Print Name of Signer**

{ } Personally known to me    **or**    { } Produced Identification

Type of Identification: \_\_\_\_\_

\_\_\_\_\_  
**Signature of Notary Public**

**Notary Stamp**

**FOR OFFICE USE ONLY**

Approved By: \_\_\_\_\_      Permit Services Rep: \_\_\_\_\_

Approved Date: \_\_\_\_\_