



CITY of CALABASAS

Building and Safety Division

Request for Extension of time to:

- Start Construction
- Complete Construction

Plan Check #
Date:
Amount
Ck#

PROJECT ADDRESS:	Permit #
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PETITIONER:

Property Owner

 Architect of Record
 Engineer of Record

 Contractor of Record

Street Address: _____

City: _____ **Zip Code:** _____

Daytime Phone: _____ **Fax No:** _____ **Fire Sprinkler:** Yes No

Description of work on Permit/ Application:	_____	Valuation: \$

I/WE REQUEST AN EXTENSION OF TIME: To allow until / /

JUSTIFICATION: Show what circumstances beyond your control have prevented you from meeting the time limit, what progress you have made to date, and the present condition of the property. Attach additional information as needed.

Petitioner's Name: _____ **Title:** _____

Petitioner's Signature: _____ **Date:** _____

FOR STAFF USE ONLY

Extension Request #	<input type="checkbox"/> 1 st <input type="checkbox"/> 2 nd <input type="checkbox"/> 3 rd	Only one extension permitted for start construction.	Permit Valuation: \$
Date Plans Submitted	/ /	Date Permit Issued	/ /
Expiration Date:	/ /	Date of Last Inspection:	/ /
Date of Request:	/ /	Changes in Law: <input type="checkbox"/> Yes <input type="checkbox"/> No	

Recommendation of Building and Safety Staff: _____ **Date:** / /

Approve Request as Stated
 Approve Request with Conditions
 Deny Request as Stated

Applicant must submit request to staff prior to expiration date.