COUNTY OF MONTEREY HOUSING AND COMMUNITY DEVELOPMENT

Planning – Building - Housing 1441 Schilling Place, South 2nd Floor Salinas, California 93901-4527 (831) 755-5025



Extension Request for Construction Applications and Permits

Please submit this form by: • Email to: permitextensions@countyofmonterey.gov • In person or Mail to the address listed above					
Permit # Assessor's Parcel Number (APN):					
Street Address:		Suite/ Uni	it #: City:		
Please use the space belo	ow to provide an explan	ation for your request for pe	ermit extension.		
Property Owner / Appl	icant Na <u>me:</u>				
Phone Number:	Ema	il Address <u>:</u>			
Extension must be paid within 14 days of notification of approval. Payments not made within this time frame will have to resubmit a new extension request form and will be subject to an additional fee. Signature: Print Name: Date:					
		For Office Use Onl	у		
Staff accepting reque		Current Expirat		YES	NO
Are there any other expired applications or permits on the property?					
Has the application or permit had a previous extension?					
Code Compliance Cas	e No:				
Extension: 🔲 Allowable Until:			Denie	d	
				Date:	
Extension Fee: \$ Inspection Fee: \$		Total Fee: \$			
Approved	Denied	An Approved Final Building Inspection must be completed within from the receipt of payment or a new extension fee will be required.			
Signature of Approving Staff Print Name			Name	Date)
Notes:					