



TOWN OF REDINGTON BEACH

PERMIT EXTENSION REQUEST

DATE: _____

PERMIT#: _____

LENGTH OF EXTENSION WILL BE 180 DAYS FROM THE APPROVED DATE.

PLEASE STATE THE REASON FOR THE PERMIT EXTENSION BELOW:

Minimum permit fee is required at the time the extension is granted.

SIGNATURE OF PROPERTY OWNER OR CONTRACTOR

DATE

Phone # of Signor: _____

APPROVAL – BUILDING DEPARTMENT

DATE

Fee (for use by Building Department Only)