



# Flagler County Permit Extension Request

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

Address of Project: \_\_\_\_\_

Contractor: \_\_\_\_\_ License Number: \_\_\_\_\_

Contact: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Reason for Extension Request:

Signature of Contractor: \_\_\_\_\_

STATE OF FLORIDA

COUNTY OF: \_\_\_\_\_

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

By \_\_\_\_\_.

*Seal*

***Notary Public, State of Florida***

\_\_\_\_\_

Personally know \_\_\_\_\_ or

*Signature*

Produced Identification: \_\_\_\_\_

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

***Extensions may be granted up to a max of 90 days with a valid reason prior to expiration date.***

***Fees will be charged in accordance with Flagler County ordinance 2008-31***

**For Office Only**

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

Fee: \_\_\_\_\_ New Expiration Date: \_\_\_\_\_

Disapproved: \_\_\_\_\_