

REQUEST FOR PERMIT EXTENSION

Please e-mail the completed form to

permitcenter@cupertino.org

	Under Plan I	Review Process	Is	sued Permit	
Building Addre	ess:		Permit	t Number:	
Owner Name: _					
Contact Name:					
E-mail Address	:		_ Phone:		
Reason(s) (plea	se be specific)	:			
Signature:			Date:		
		(CITY OF CUPERT)	INO USE ONLY)		
Ye	s No				
Approval:] 🗆	Expired Date:		Fee: \$	