



## CITY of OPA-LOCKA Building Department

### Permit Extension Form

- Permit #: \_\_\_\_\_ Contractor: \_\_\_\_\_
- Phone #: \_\_\_\_\_ Address: \_\_\_\_\_
- Owners name: \_\_\_\_\_ Job Address: \_\_\_\_\_
- Permit Description: \_\_\_\_\_ Permit Expiration Date / / \_\_\_\_\_
- Work commenced yes \_\_\_\_\_ No \_\_\_\_\_ Last approved inspection \_\_\_\_\_
- Reason for extension \_\_\_\_\_
- \_\_\_\_\_
- If this the master permit list all other permits that must also be extended:  
Plumbing \_\_\_\_\_ Electrical \_\_\_\_\_ Mechanical \_\_\_\_\_
- Other \_\_\_\_\_ Other \_\_\_\_\_ Other \_\_\_\_\_
- Extension period: \_\_\_\_\_ No. of other extensions \_\_\_\_\_ (Not to exceed 180 days)
- Signature of permit holder: \_\_\_\_\_ Name of permit holder (print): \_\_\_\_\_
- \_\_\_\_\_

### **Permit Extension Form (cont.)**

- State of Florida
- County\_\_\_\_\_
- Sworn to and subscribed before me this \_\_\_\_\_ day of 20\_\_\_\_ by: \_\_\_\_\_
- ( ) Personally known ( ) Produced identification-Type of Identification\_\_\_\_\_
- \_\_\_\_\_
- Signature of Notary Public Seal:
- Extension granted: Yes Permit extension period \_\_\_\_\_ days
- Extension denied: Yes Reason for denial \_\_\_\_\_
- \_\_\_\_\_
- Building Official Signature: \_\_\_\_\_ Date: / /20\_\_\_\_\_