

## Building & Development Review Services 440 Court Street, Clearwater, FL 33756 (727) 464-3888 buildingservices@pinellas.gov www.pinellas.gov

## **Extension and Reinstatement Request Form**

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Date:	Permit #:	Extend	Reinstate
Job Address:			

Please extend or reinstate this permit for one hundred eighty (180) days from the approval date below. I understand an approved inspection must occur within this time. Each **successful** or **approved** inspection will extend the permit for an additional one hundred eighty days (180) from the date of that inspection.

## (All extensions and reinstatements are at the discretion of the Building Official. You must provide a reason for the delay. Please provide as much information as possible.)

I am requesting an extension, or reinstatement due to \_\_\_\_\_

(Check the status of your request for extension or reinstatement online at <u>pinellas.gov/access-portal</u> Results are posted within one-to-two business days after receipt of your request.)

Owner or Contractor - Printed name

Owner or Contractor - Signature

Email Required

Phone Number Required

## FOR OFFICE USE ONLY DO NOT WRITE BELOW THIS LINE

Ext		1C	IO I	n
	CI	13	IU	

Habitat Approved Not Approved	Habitat Extension Approved By	Date
Extension Approved Not Approved	Extension Approved By	Date
Extension # 1 2 3 (Since 10/1/2009)	Fee required? Yes 🗌 No 🗌	Paid? Yes 🗌 No 🗌
Reinstatement		
Approved 🗌 Not Approved 🗌	Reinstatement Approved By Fee required? Yes No	Date Paid? Yes No 🗌

Revised Extension and Reinstatement Request 5/2023