



Code Enforcement Extension Form

Date of Request: _____

Requestor Name: _____

Address _____

City/State/Zip _____

Home Phone _____ Cell Phone _____

Case Number: _____ Assigned Officer _____

Email: _____

Requestor's Connection to Property

- Owner
- Business Occupant/Tenant
- Business Owner
- Registered Agent
- Property Manager

Provide reason for extension:

Have you corrected any violation(s), (if multiple): _____

For Office Use Only

<input type="checkbox"/>	APPROVED & NEW COMPLIANCE IS:
<input type="checkbox"/>	DENIED

Authorized Signature: _____