

Clay County Building Department 477 Houston Street 3rd Floor P.O. Box 1366

Green Cove Springs, FL 32043 Phone: 904-284-6307 Option 4

Request for Permit Extension

Please submit this form via email or upload into the permitting portal. Email: permits@claycountygov.com

Permit #: _____ **Property Address:** Contractor: Phone: Email: License: Owner: Phone: Email: Original Expiration Date: Statement for Extension: This form must be submitted prior to the original expiration date of the building permit. The Permit Extension Request must be signed by the Contractor or the Owner and must be notarized. By signing below, the Contractor and Owner acknowledges that they are requesting to extend the permit. If approved an additional 180 days will be added to the permit. The Building Final inspection must be approved within the extension timeframe. There is only one extension request allowed per permit. Signature of Qualifier/Permit Holder **Print Name** Date Sworn to and subscribed before me this _____ day of _____ A.D. 20 ____ Personally known or produced identification. Type of identification produced ______ and number: _____ Signature of Notary Date