



RENEWAL / EXTENSION of PERMIT

In accordance with Seminole County Code, Appendix "A" section 105 - all requests for a permit extension and or a permit Renewal must be in writing.

Permit: _____ Date: _____

Address: _____

Lot / Subdivision: _____

Contractor / Company: _____

Contact: _____ Phone: _____

Length of time for extensions: _____ days

If applicable, do you have the reviewed stamped plans for this permit, yes no n/a

Reason for Renewal / Extension request:

***Please submit this form in our office or by fax: 407-665-7486 or email to:
BPCustomerservice@seminolecountyfl.gov***

Contractor's Printed Name

Contractor's Signature and Date

Building Official: _____

***** Office Use Only *****

Date permit was issued: _____

Date of last approved inspection: _____

Date of last Renewal / Extension: _____

Scope of work: _____

Plans Required: Yes No