



COUNTY OF SANTA CRUZ

PLANNING DEPARTMENT

701 OCEAN STREET, 4th FLOOR, SANTA CRUZ, CA 95060
(831) 454-2580 FAX: (831) 454-2131 TDD: (831) 454-2123

Request for Extension of Building Application

Extension Policy

Pursuant to [Section 12.10.320\(d\)](#) of the County Code, you have until the expiration date of your application to resolve all deficiencies and obtain your permit. The expiration date is two years after the application date or six months from the date the application is approved.

Instructions for using this form

Please complete this form in its entirety. Submit the form in person or by mail with a check in the amount of \$313.20 made out to the County of Santa Cruz, to the following address:

**County of Santa Cruz Planning Department
ATTN: Building Counter
701 Ocean St, Room 400
Santa Cruz, CA 95060**

I request an extension for the following reasons:

Check all boxes

- I have enclosed the required \$313.20 in a check made out to the County of Santa Cruz. Regardless of the County's determination, I understand that this fee will not be refunded.
- I understand that inaccurate information may result in denial of my request.
- I understand that my request may be denied if other approvals (such as a development permit) have expired or will expire during the extension period.

Date: _____ APN: _____ Application# _____

Print Name: _____ Signature: _____

COUNTY USE ONLY BELOW THIS LINE

DENIED APPROVED Time Granted _____ Staff _____