



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 an Active Building Permit

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:

- I have demonstrated a good faith effort to commence or continue construction; however, financial or other hardships have temporarily delayed work on my project; (Extension limited to 6 months per request. A written explanation must be attached)
- A development moratorium has been imposed on my construction site which prohibits or delays construction; (Extension limited to 1 year per request)
- A lawsuit which prevents, delays, or prohibits work on my project has been filed and is pending in court; submit complaint, pleadings and answers. See [County Ordinance 12.10.335 \(c\)](#), for details.

Check all boxes

- My permit has not yet expired by limitation;** (A permit expires by limitation if it is not inspected and approved by a County Building Inspector within one year of the permit being issued, or if one year has elapsed since the last inspection and approval by a County Building Inspector); and
- No change is made in the description of the work, building plans, or location or design of any structure;** and
- The work described in my permit is not required to be completed to rectify a previously issued stop work order;** (Contact the Code Compliance Section if you have an unresolved violation to see if your project is eligible for an extension); and
- I have enclosed \$313.20** I understand that inaccurate information may result in denial of my request and that this fee will not be refunded.

Date: _____ APN: _____ Application# _____

Print Name: _____ Signature: _____

COUNTY USE ONLY BELOW THIS LINE

 DENIED APPROVED Time Granted _____ Staff _____