



**BUILDING APPLICATION AND PERMIT EXTENSION / REACTIVATION REQUEST FORM**

**IMPORTANT:** Please complete a separate request form for each application or permit issued for a project address.

Today's Date: \_\_\_\_\_

Permit Number: \_\_\_\_\_

Project Address: \_\_\_\_\_  
(Street Number and Name)

What is the status of this project? ☐ Permit Issued ☐ Permit Not Yet Issued

Provide justification for the extension or reactivation request.

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Provide a timeline schedule for completing the permitted work.

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Your Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/State/Zip Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

My Role: ☐ Property Owner ☐ Licensed Contractor ☐ Other \_\_\_\_\_  
(brief description)

EMAIL completed form to: **ExpiredPermits@paloalto.gov**