



Islamorada, Village of Islands Building Services

86800 Overseas Highway, Islamorada, FL 33036

T: 305-664-6400, F: 305-664-6469

90-DAY PERMIT EXTENSION REQUEST APPLICATION

Application Fee: \$100.00 Maximum of Two Extensions Per Permit.

Permit Number: _____ Current Expiration Date: _____

Physical Address: _____

Parcel ID/ Real Estate No. _____ Alternate Key: _____

Applicant: _____

Applicant is the: (Select one) Owner ____ Contractor ____ Agent* ____

Mailing Address: _____

Phone Number: _____

Email Address: _____

*Applicants other than owners and contractors must submit a notarized letter authorizing the agent to act on their behalf. This letter must include the agent's name, address and phone number.

The following requirements must be met in order for the permit extension to be granted:

1. The building permit to be extended is an active permit.
2. There are no active or open code violations on the property.
3. Payment of \$100.00 with completed extension request form.
4. Valid just cause for the extension as deemed by the Building Official pursuant to the Florida Building Code.

a. Please state the reason (just cause) for the request: _____

5. A maximum of two extension shall be considered for approval per permit.

Electronic Submission Statement: Under penalty of perjury, I certify that the information contained in this application is to the best of my knowledge, true, accurate and complete. Electronic signatures are not required to be notarized but are only valid for electronic submittal.

Signature of Applicant:

Date

For Office Use Only:

Date Received: _____ Approved: _____ New Expiration: _____ Denied (reason): _____

Received By: _____ Entered: _____ Applicant Notified: _____