

Request to Extend Plan Check/Permit

Date: _____

Attention: Hadi Tabatabaee, County of Orange Building Official

Job Site Address: _____

Permit Number(s): _____

I, _____, the project (owner/contractor/designer) of the above referenced permit(s), would like to request an extension. Reason for request: _____

Name: _____

Telephone Number: _____

E-mail address: _____

Signature: _____

✓ ***Please note there is a \$154.50, non-refundable fee for all requests to extend Plan Checks or Permits.***
(OC Board of Supervisors Resolution No. 15-017, adopted March 10, 2015.)

FOR OFFICE USE ONLY

County Approval _____ Date _____

Extension Time _____ New Expiration Date _____

Extension Fee Yes No Note _____



Credit Card Authorization Form

Company Credit Card: Yes No

Company Name.....Date.....

Cardholder's Name.....

Permit No(s).....

Card Type: VISA MasterCard American Express

Card No.....

Expiration Date..... Customer Code (3-4 digit).....

Total Amount \$.....

Cardholder's Handwritten Signature.....

Receipt Address Information:

Street.....

City..... State..... Zip code.....

Phone number..... Return fax number.....

E-mail.....

Complete and return to:

CASHIER'S EMAIL: centralfiles@ocpw.ocgov.com

CASHIER'S DIRECT FAX NO: (714) 967-0898

*Fax Hours: 8:00 am -4:00 pm, Monday – Friday (except Holidays)

CASHIER'S Message Phone (714) 667-9770

Cashier's Initials..... Date processed.....