



CITY OF SANTA CLARITA BUILDING & SAFETY

REQUEST FOR PERMIT REACTIVATION / EXTENSION

In order for Building and Safety to process your request, please provide the information below. Once complete, you may bring the form to Building and Safety or send it via U.S. mail or e-mail, or fax to:

Building and Safety

Attention: Cristina Peterson
23920 Valencia Boulevard, Suite 140
Santa Clarita, CA 91355
Phone: (661) 255-4950 Fax: (661) 291-1559
Email: cpeterson@santa-clarita.com

Permit No(s): _____ Permit Issuance Date(s): _____

Permit Address: _____ Inactive Date (if known): _____

Description of Work: _____

Applicant/Owner Name: _____
(please print)

Applicant/Owner Address: _____

Contact Phone Number: _____ E-mail: _____

Please check the appropriate box:

- I am requesting to reactivate the above permit(s)
- I am requesting an extension to the above permit(s)
- I am requesting an extension to the above permit application (maximum of two extensions)

Reason for the request: _____

Applicant/Owner Signature: _____ Date: _____

For Office Use Only

APPROVED DENIED

Code Updates Required..... YES NO

Fee Required..... YES NO

New Expiration Date: _____ Reviewed by: _____ Date: _____

Conditions of approval/denial: _____