



CITY OF CLIVE
 1900 NW 114th Street
 Clive, IA 50325-7077
 Phone (515)223-6221
 www.cityofclive.com

REQUEST FOR BUILDING PERMIT EXTENSION

APPLICATION DATE		PERMIT TYPE
PERMIT NO.	ORIG. EXP. DATE	NEW EXP. DATE

PROJECT INFORMATION	REASON FOR EXTENSION & EXPECTED COMPLETION:
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PROJECT ADDRESS / SUITE NO. (if applicable)
BUSINESS / OWNER NAME
BUSINESS / OWNER CONTACT PHONE
BUSINESS / OWNER CONTACT E-MAIL
PROJECT DESCRIPTION

REASON FOR EXTENSION & EXPECTED COMPLETION:

CONTRACTOR INFORMATION	SITE CONDITIONS (to be completed by staff):
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COMPANY NAME
ADDRESS
CITY, STATE, ZIP
PHONE
PROJECT CONTACT / PHONE
PROJECT CONTACT E-MAIL ADDRESS

1. Public Safety 2. Erosion Control 3. Nuisance Abatement 4. Other

_____ Please print Owner or Authorized Agent's Name _____ Signature of Owner or Authorized Agent

<input type="checkbox"/> Approved <input type="checkbox"/> Approved with conditions (see below) <input type="checkbox"/> Denied (see below)	
_____ Building Official or Authorized Representative	_____ Date