

COUNTY OF SHASTA  
DEPARTMENT OF RESOURCE MANAGEMENT  
BUILDING DIVISION  
1855 PLACER STREET, SUITE 102  
REDDING, CA 96001

OFFICE: (530) 225-5761  
FAX: (530) 245-6468  
[www.co.shasta.ca.us](http://www.co.shasta.ca.us)

**BUILDING PERMIT EXTENSION OF TIME REQUEST**

**Permit Applications:**

Applications are valid for 180 days. **PRIOR** to expiration, you may submit a one-time written request to extend the application. Applications will not be extended beyond one year from the original date of application, which is an additional 180 days.

**Issued Permits:**

Once a building permit has been issued it expires by limitation:

1. Two years after the permit is issued, or
2. If work has not started within 180 days from the date of permit issuance, or
3. If the work is suspended or abandoned for a period of 180 days.

Permits may be renewed for one year if not considered expired as described above upon **payment of the required fee. Please call 225-5761 to obtain the fee amount for the extension of your permit and submit the correct fees with this request.**

Please provide the following information so that your request may be considered:

Permit Number: \_\_\_\_\_ Assessor's Parcel Number: \_\_\_\_\_

Owner's Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

Justifiable Cause for Extension (please explain): \_\_\_\_\_

Proposed completion date of the project: \_\_\_\_\_

**Amount of fee enclosed (issued permits only): \$** \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**BOTTOM PORTION FOR COUNTY USE**

PERMIT EXTENSION APPROVED. NEW EXPIRATION DATE: \_\_\_\_\_

PERMIT EXTENSION DENIED. REASON: \_\_\_\_\_

Print Name & Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_