



124 North Cloverdale. • Cloverdale, CA 95425

Permit Extension Form

To: _____
(Address of Permit)

RE: Extension of Permit # _____ for 90 days.

It has been requested by: _____

This extension will be good until _____

Accepted _____

Denied _____

Applicant name: _____

Address: _____

Date mailed to applicant: _____

If you have any further questions, please feel free to contact me at (707) 894-1725.

Sincerely,

City of Cloverdale

Mark Harris
Building Department

Cc: File