Building & Safety

Request for Permit Extension

Job Address:	**Permit #:**
Owners Name:	**Project description:**
Applicants Name:	**Permit issued date:**
Applicants Phone #: **Applicants E-mail:**	**Date and type of last documented inspection:**
Date of last plan check activity:	**Project expiration date:**

(Please attach a copy of the Permit and the Inspection Record (Signed Job Card and any Correction Notices))

Reason for Extension Request:

Proposed completion date:

Applicants Signature: Date:

This section for Building & Safety use only:

In order to ensure a timely completion of this project the following conditions and progress benchmarks must be met in order to maintain a valid extension of this permit:

Extension processing fee must be paid when submitting application.

Extension processing fee: $111

· Paid date:

Deposit Account must have sufficient funds to complete project.

Deposit Acct Balance:

· Verified by:

□ Extension Approved to:_____ · Extension Denied

(New Expiration Date)

Signed:_____ Date: _____

Brian Gumpert, Interim Building Official

Form Updated:2/3/2025

Copy to:
1. Building & Safety File
2. Permit Applicant

City of Jurupa Valley
8930 Limonite Ave. Jurupa Valley, CA 92509
(951) 332-6464|Fax (951) 332-6995
http://jurupavalley.org/Departments/Development-Services/Building-and-Safety