SOUTHLAKE
PLANNING & DEVELOPMENT SERVICES

BUILDING INSPECTIONS
PERMIT EXTENSION REQUEST

Permit Number: _____ **Current Expiration Date:** _____

Address on Permit: _____
(Project address)

Last Inspection Type/ Date/Result: _____

Person Requesting Extension: _____

Name of Company/Contractor: _____

Business Phone:_____**Email**_____

Length of Time Requested:

_____30 DAYS _____60 DAYS _____90 DAYS _____120 DAYS

Reason for Request:_____

_____

_____ _____
Signature **Date**

_____
Print Name

OFFICE USE*

_____
New Expiration Date

_____ _____
APPROVED BY **DATE**

Email completed form to: permittechs@ci.southlake.tx.us

BUILDING INSPECTIONS, 1400 Main St., Suite 250, Southlake, TX 76092
Phone: 817-748-8236
Feb 2026