



**MANATEE COUNTY GOVERNMENT  
BUILDING DEPARTMENT  
"TO SERVE WITH EXCELLENCE"**

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***PERMIT EXTENSION***

**Policy:** Set forth by Florida Building Code – 2017 Sixth Edition

**105.3.2 Time limitation of application.**

An application for a permit for any proposed work shall be deemed to have been abandoned 180 days after the date of filing, unless such application has been pursued in good faith or a permit has been issued; except that the building official is authorized to grant one or more extensions of time for additional periods not exceeding 90 days each. The extension shall be requested in writing and justifiable cause demonstrated.

After the permit has been issued, if there has not been an approved inspection within 180 days, the permit will become invalid.

***Requests for permit extensions must be made prior to the permit becoming invalid. Extensions shall not be granted for an invalid document.***

**Impact fees WILL be re-assessed on all permits at the time of the extension, UNLESS they have been prepaid prior to the permit extension request.**

**Procedure:**

1. A \$10.00 will be accessed at submittal of the extension request. Fee is payable to "Manatee County".
2. Submit to Permitting Section:
  - a.) Permit extension request
  - b.) General information sheet
  - c.) Reason for request
3. The Permitting Division will process the request and forward to the Inspections Division for approval. Please allow 5-7 business days for review.

# PERMIT EXTENSION REQUEST

Permit No.: \_\_\_\_\_ Job Address: \_\_\_\_\_

Owner Name: \_\_\_\_\_ Date: \_\_\_\_\_

Permit Expiration Date: \_\_\_\_\_

I understand that the above referenced permit shall become invalid unless the work authorized by such permit is commenced within 180 days after its issuance, or the work authorized by such permit is suspended or abandoned for a period of 180 days after the time the work commenced. In order for a permit to remain active it must have at least one passed, documented inspection every 180 days (not including a Notice of Commencement).

With this understanding I declare that the above referenced permit will become invalid on \_\_\_\_\_, 20\_\_ and do hereby request an extension of time of \_\_\_\_\_ days for said permit for reasons outlined on the letter of request which is attached. ***I acknowledge that as a result of this extension, my impact fees will be re-assessed at the rates that are in effect at the time of this application. I further acknowledge that this impact fee re-assessment will ONLY be waived if the impact fees have been paid prior to this extension.***

(\_\_\_\_\_)  
Initials

Contractor: \_\_\_\_\_

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

Phone: (\_\_\_\_\_) \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Owner: \_\_\_\_\_

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

Phone: (\_\_\_\_\_) \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Contractor or Owner Signature: \_\_\_\_\_

STATE OF FLORIDA  
COUNTY OF MANATEE

The foregoing instrument was acknowledged before me by means of  physical presence or  online

notarization, this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_, by \_\_\_\_\_,

who is personally known to me ( ) or has provided the following identification

\_\_\_\_\_. Expiration Date: \_\_\_\_\_ and who did/did not take an oath.

Notary Public Signature \_\_\_\_\_

Notary Public Stamp Here

**Extension Issued Date:** \_\_\_\_\_ **Extension Expiration Date:** \_\_\_\_\_

**Fee Added:** \_\_\_\_\_

PERMIT EXTENSION CHECKLIST

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

Received By: \_\_\_\_\_

Record Number #: \_\_\_\_\_

Date Permit Issued: \_\_\_\_\_

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

Previous Permit Extensions:  Yes  NO

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Applicant shall explain specifically all reasons why an extension is necessary. Include time period for which extension is requested and date job will be completed.

**Please be specific and thorough.**

Reason for Request: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**Permitting Review**  **Plan Review**  **FEMA Review**  **Zoning**  **Impact Fee Review**

Comments: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

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**Building Official:**  **Approved**  **Denied**

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

Comments: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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