

City of Pomona —Building and Safety Division Extension Request

To: City Building Official	Permit Extension Plan Check Extension
Date:	☐ Abatement Extension
From:Permit/Plan Check Number:	
Address:	
Email: Phone Nu	ımber:
I am requesting an extension of my permit(s) as noted above due to the following reason:	
Your Signature	
FOR STAFF USE ONLY. DO NOT WRITE BELOW THIS LINE	
☐Extension Granted Permit New Ex	piration Date:
☐Extension Denied ☐ You must Repa	y Permit Fees
Permit Hold: No permits are allowed to be pulled until this has been closed.	
ADDITIONAL NOTES:	
Date:	
Signature: City of Pomona Building and Safety Division 505 S. Garey Ave Pomona, Ca 91769 909-620-2371	