



**COUNTY OF MENDOCINO**  
**DEPARTMENT OF PLANNING AND BUILDING SERVICES**  
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## REQUEST FOR EXTENSION/REINSTATEMENT

### OWNER/AUTHORIZED AGENT INFORMATION

Property Owner Name: \_\_\_\_\_

Authorized Agent Name (If Different): \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

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

City/State/Zip: \_\_\_\_\_

I hereby request:      An Extension                      A Reinstatement (*expired permits*)      For:  
  
                                 An Application                      A Permit

Application/Permit No(s): \_\_\_\_\_

I am making the request for the following reason(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

By signing and submitting this document I acknowledge that the application or permit may be subject to any newly adopted Building and/or County Codes, and any fees adopted by the Mendocino County Code of Supervisors.

Requestor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PLANNING DIVISION (PLANNER)**

Approved

Denied due to the following:

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Planner (print name): \_\_\_\_\_ Date: \_\_\_\_\_

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**BUILDING DIVISION (INSPECTOR)**

Approved

Denied due to the following:

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Inspector (print name): \_\_\_\_\_ Date: \_\_\_\_\_

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**BUILDING DIVISION (PERMIT TECHNICIAN)**

Approved

Denied due to the following:

Fee: \_\_\_\_\_ Receipt # \_\_\_\_\_

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Permit Technician (print name): \_\_\_\_\_ Date: \_\_\_\_\_