



APPLICATION FOR EXTENSION OF CONSTRUCTION TIME

CITY OF BELVEDERE
450 SAN RAFAEL AVE • BELVEDERE, CA 94920-2336
PH. 415-435-3838 • FAX 415-435-0430 • WWW.CITYOFBELVEDERE.ORG

FOR STAFF USE ONLY

Date: _____ Rec'd. by: _____

Amount: _____ Receipt No.: _____

Parcel No.: _____ Zone: _____

SECTION 1 • PROJECT SUMMARY

Does this project have an active building permit? No Yes Permit No.: _____

Does this project have Planning Commission approval? No Yes Approval date: _____

Address of Property: _____

Record Owner of Property: _____

Mailing _____ Daytime Phone: _____

Address: _____ Fax: _____

_____ Email: _____

Owner's Representative: _____

Mailing _____ Daytime Phone: _____

Address: _____ Fax: _____

_____ Email: _____

Estimated cost of construction: _____ Building Permit completion date: _____

Construction period assigned by Planning Commission: _____

Please explain why an extension of construction time is needed (attach supporting documents, if any):

