

Substantial Completion and Temporary Occupancy Extension Request

Permit Number	Date
Project Name	Project Address
Instructions: This form must be completed to red	quest the extension of additional time on a project.
Reason for Delay:	
Provide a brief description of why the remain during the initial completion period.	ning items of work were unable to be completed



Schedule for Completion:

Approval (City Use): _____

Date: _____

Provide a brief schedule of expected completion dates for the remaining corrective actions not yet complete. Inspections may be viewed by visiting this link and inputting the permit number: https://devservices.cityofls.net/Permit/Locator
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nis request will be reviewed by City Staff associated with this project to determine if the extension is arranted. If additional information or clarification is needed, staff will contact the person below to esolve these matters. Reviews are typically completed within two business days and if additional time required the signee will be contacted with the timeframe for completion.