

PERMIT RENEWAL/EXTENSION FORM

CUSTOMER'S NAME : _____ **PERMIT/S#:** _____

DATE: _____

CHECK ALL THAT APPLY:

EXTENSION REQUEST _____

RENEWAL REQUEST _____

REQUEST EXPLANATION: _____

CUSTOMER CONTACT INFORMATION:

RETURN ADDRESS: _____

PHONE NUMBER: _____

EMAIL: _____

PAYMENT METHOD: (\$25.00 FEE FOR EACH PERMIT)

CHECK # AND AMOUNT: _____

CASH AMOUNT: _____

CUSTOMER SIGNATURE: _____