

**CITY OF ANAHEIM
PLANNING DEPARTMENT
BUILDING DIVISION**

PLAN CHECK EXTENSION REQUEST

PROCESSING FEE: \$111.00

Last Name	First Name	Company Name
Mailing Address (Street)	City/State/Zip	
(Area Code) Phone Number	E-mail	

PLAN CHECK INFORMATION

Job Location: _____

List all Plan Check Numbers: _____

State Reason for Requesting an Extension: _____

I HEREBY CERTIFY THAT THE ABOVE STATEMENT IS TRUE.

Signature	Title of Applicant	Date

Office Use:

Current Expiration Date: _____ () Fees paid () Processed in Accela

Department Action: () Denied () Approved - Updated Expiration Date: _____

Name Date

Comments:

Following a decision on the extension request by the Building Division, the applicant may request a letter outlining the Division's findings.