DEPARTMENT OF FINANCIAL SERVICES

CUSTOMER BILLING SERVICES DIVISION

EXTENSION REQUEST FORM

Completed form MUST be uploaded to the permit via your CSS portal
CapeCoral.gov/energov

Date:	Permit #:	Type of Permit:

** Note: Extension requests not to exceed 90 days **
Permits are extended from the expiration date, not from the date the extension request is submitted

Days Requested:	Days Granted:
Applicant Name:	
Site Address:	

Block:	Lot:	Phone:
Reason job not completed:		
Printed Name:	Signature:	

FOR OFFICE USE ONLY

Current Expiration Date:	New Expiration Date:
Approved By:	Date:
Rejected By:	Date:
1st:	2nd:
3rd:	4th:
Fee: $	CSR Initials: