McHenry County Department of Planning & Development

Permit #: Contact Name: Phone:

2200 North Seminary Ave. Woodstock, IL 60098 plandev@mchenrycountyil.gov 815.334.4560



PERMIT EXTENSION REQUEST FORM

Permit extensions shall be requested in writing using this form and shall demonstrate justifiable cause **[IBC & IRC 105.5.] & SMO Article IV, Section E.** In addition to the written request and justifiable cause, provide a schedule for completion of outstanding work within the extension term. Permit extension fee shall be 25% of the original permit fee per the McHenry County Planning and Development Fee ordinance.

PIN:Address:				
Standard permit exter	nsion conditions:			
 The maximum term for any permit extermined Stormwater Management Major and M If the work is not completed, inspected for the remaining work will be required The permit conditions included at the times are included as part of the extension 	ining Developmen and approved pric me of issuance sha	t permits may be expiration	xtended up to one ye of the extension, a n	ar. ew permit
Owner's Name:	Owne	r's Signature:		
Office Use Only:				
Associated Request for Enforcemen	it: \	'es:	No:	
MCDH Well and Septic permit rener	wal required: \	'es:	No:	
Building permit expiration date:		Building per	mit fee: \$	
Stormwater permit expiration date	: 	_ Stormwater p	ermit fee: \$	
Pern	nit extension fe	e due (25% total p	ermit fee): \$	
Building permit extension granted t	o:	Buil	ding:	
Stormwater permit extension grant	ed to:	SW	:	
File copy:	Inspection cop)y:	RFE copy:	