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TOWN OF LOOMIS BUILDING DEPARTMENT

PERMIT APPLICATION/PERMIT EXTENSION REQUEST

Permit Application Extension ___ Permit Extension ___

Permit/Application Number _____

Date Received/Issued _____

Name _____

Job Address _____

Contact Number _____

Email Address _____

Scope Of Work _____

Justifiable Cause For Extension _____

FOR OFFICE USE ONLY

EXTENSION GRANTED _____ EXTENSION DENIED _____

NEW EXPIRATION DATE _____

REASON FOR DENIAL _____

CHIEF BUILDING OFFICIAL SIGNATURE / DATE