



PERMIT RENEWAL APPLICATION

request to renew an expired permit. renewal of permit is subject to payment of additional fees and may require submission for plan check review.

JOB ADDRESS _____

Permit Number _____

Submittal Instructions Permit Renewal Application may be submitted to a Permit Specialist at the City Hall public counter, Room 111, or emailed to eplans@smgov.net. Processing may take up to five working days. Fees will be assessed and collected prior to renewal becoming effective.

Name of Permit Holder	Name		Phone		
	Address		Unit	City	
	State	Zip	Email		
Property Owner	Name		Phone		
	Address		Unit	City	
	State	Zip	Email		
Contractor	Contact Name		Company Name		Phone
	Address		City	State	Zip
	Email		City Business License No.	CA Contractor's License No.	Classification

PROJECT INFORMATION (complete all of the following)

Description of Work Previously Permitted	Provide the original permit description as it reads on the building permit.			
Description of Work Remaining	Provide detailed description of the work remaining towards completion of the project.			
Project Data	Percentage of project completed	Anticipated number of days to complete construction	Is building to be occupied during construction? YES <input type="checkbox"/> NO <input type="checkbox"/>	Cost of remaining work

I certify that I have read and fully understand the detailed requirements of this application, and state under penalty of perjury, under the laws of the State of California, that the above information and associated project plans is true and correct. I agree to comply with all City, county, and state laws and ordinances related to building construction and hereby authorize representatives of the City and county to enter upon the above-mentioned property for inspection purposes. I realize that this application is a permit request and it does not authorize the work specified herein. Further, neither the City nor any board, department officer or employee thereof make any warranty nor shall be responsible for the performance, or results of any work described herein.

ROLE OF THE UNDERSIGNED IS (CHECK ONE): OWNER CONTRACTOR OTHER _____

Name _____ Signature _____ Date _____

STAFF USE ONLY

No inspections - 100% of permit fees Rough inspection - 50% of permit fees Final inspection - 20% of permit fees

Permit Specialist	Date		Fee Amount			
Building & Safety	City Planning	Mobility	Civil Eng (PW)	Solid Waste (C&D)	Fire	Rent Control
	Landmark Fee Exempt? Y / N					

SANTA MONICA CA 90401