



Southwest Michigan Building Authority

# PERMIT EXTENSION REQUEST FORM

7275 West Main Street, Kalamazoo MI 49009

Phone: (269) 585-4150

Email: [info@swmiba.org](mailto:info@swmiba.org)

Web: [www.SWMIBA.org](http://www.SWMIBA.org)

## I. Job Location

Name of Owner / Agent	Phone Number of Owner / Agent
Job Location (Street Number & Street Name)	Name of City, Village, or Township of Job Location

## II. Applicant Contractor Homeowner (Check Applicable)

Name	Company Name	License Number	Expiration Date
Address (Street Number and Name)	City, State	Zip Code	
Phone Number (Include Area Code)	Fed. Emp. No. (Or Reason for Exemption)		
Email Address			

## III. Permit Information

Permit Type (Building, Electrical, Mechanical)	Permit Number	Current Expiration Date
--	---------------	-------------------------

## IV. Reason for Extension

Please Describe the Reason for Your Request and The Number of Days To Extend the Permit

### VALIDATION - SMBA INTERNAL USE ONLY

- Approved, Permit Extended (      ) Days  
 Not Approved

Approved By (Initials)\_\_\_\_\_