



REQUEST TO WITHDRAW OR EXTEND UNISSUED BUILDING PERMIT APPLICATIONS

INSTRUCTIONS

All requests to extend or withdraw an unissued building permit application are to be made using this form. The form is to be completed and signed by the permit applicant, property owner or authorized agent for extensions, and solely by the property owner or their authorized agent for withdrawal, and submitted to dbi.cpbrequest@sfgov.org for review and approval.

- In-House Review permit application extension or withdrawal requests will be considered by DBI's Plan Review Services manager. Upon approval and processing, a copy of this form documenting approval of the request will be emailed to the applicant.
- Over-the-Counter (OTC) permit application extension or withdrawal requests will be considered by DBI's OTC manager. Applicants requesting an OTC extension must also schedule an appointment with the OTC manager to review and discuss their request. OTC extension or withdrawal requesters must bring the original application form and both plan sets (if applicable) to the appointment.

Once the request is approved, the property owner or authorized agent of record will be directed to pay the extension or withdrawal fee. See Information Sheet G-06 for additional details.

Job address: _____	Building Application #: _____
Owner's Name: _____	Contact Info/Tel #: _____
Mailing Address: _____	Email: _____
City: _____	Zip: _____
This is to request (please check one):	
<input type="checkbox"/> Withdrawal	\$166.64 Administration
<input type="checkbox"/> Extension	\$298.38 plus 20% of All Plan Review Fees
Reason for Request: _____	
Applicant's Name (Print)	Applicant's Signature
Date	

Date Received: _____	DO NOT WRITE IN THIS BOX - OFFICIAL USE ONLY
Inspection Division (if applicable):	
<input type="checkbox"/> Approved	<input type="checkbox"/> Disapproved w/comments _____
Name	Signed
Date	
Disposition/comments by the plan review manager:	
<input type="checkbox"/> Approved	<input type="checkbox"/> Approved w/conditions
<input type="checkbox"/> Disapproved w/comments	
Comments: _____	
Name	Signed
Date	
Date: _____	Receipt #: _____