Patrick Fosdahl, MS, REHS Director of Environmental Health

## **Deadline Extension Request**

Type of Extension (check o	one): Notice of	Violation (NOV)	Invoice		
Facility ID #					
CERS ID #					
Invoice or NOV ID #					
Original Invoice Due Date or NOV Return to Compliance Date					
Violation Code(s) (for NOV deadline extensions)					
Name of Business					
Facility Address					
Date of Request Submittal					
Length of Extension Requested	30 days	Other*:			
Reason for Deadline Extension Recordinal time period provided):					
* For NOV Return to Compliance deadline extension requests and any request greater than the standard 30 days, please fill out the proposed timeline of correction in detail (see back) and attach all supporting documentation. Requests submitted without this information/documentation are unlikely to be approved.					
Name	Signature	Date			
Title	Phone #	Email			
Submit this request form and all supporting documentation to your district inspector via email.					
If you have any questions, please contact (415) 252-3800 and ask to be transferred to a member of the Hazardous					

Materials and Waste Program. A determination regarding the request will be provided within ten (10) business

days.

## **Proposed Timeline of Correction**

Description of Activity and/or Expected Abatement Milestone

Date

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SFDPH OFFICE USE ONLY					
Determination Date:		Approved	Approved with Conditions	Denied	
Comments:					
Processed by:					