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APPROVED BY (INITIALS): BLDG _____ FIRE _____ PW _____ DATE: _____
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4970 City Hall Blvd
North Port, FL 34286
Ph: 941-429-7044
Inspections: 855-941-4636

CITY OF NORTH PORT

Permit Extension/Reinstatement Form

bldginfo@cityofnorthport.com
www.cityofnorthport.com

SELECT ONE:

Permit Application Extension (Submitted Status) ☐

Permit Extension/Reinstatement (Issued Status) ☐

Date: 04/04/2022 Permit Type: New construction Permit #: 06-69-73

Job Address/Parcel ID: 5272 Chaplin Ter North Port FL Phone #: 941-204-9604

Permit Holder Name: Petr Martynenko Email: 2603petrovich@mail.ru

Date Permit Expired/Will Expire: 04/04/2022

If granted I understand that the above referenced permit extension shall become invalid unless the work authorized by such issued permit extension is commenced within six (6) months after its issuance. Or, if the work authorized by such issued permit had begun but has not received a passed inspection within 180 days from the date of the last inspection. Or, a permit application extension is not pursued in good faith for a period of 180 days from the last correspondence. I hereby request and extension of time for a period prescribed by the Florida Building Code for said permit for reasons described in the attached letter of explanation. (Please attach your letter of explanation.)

I acknowledge that as a result of this extension, my impact fees will be re-assessed at the rates that are in effect at the time of this extension request (if applicable). (PM) Initials

Homeowner's Signature: [Signature] Print Name: Petr Martynenko
Contractor (License Holder) Signature: [Signature] Print Name: Petr Martynenko

STATE OF FLORIDA, COUNTY OF SARASOTA

The foregoing instrument was acknowledged before me this 4 day of April, 2022 by

Petr V Martynenko who is personally known to me ☒ or who has produced

FLDL M635 as identification by means of ☒ physical presence or ☐ online notarization.

Notary Public Signature: [Signature]

