



BUILDING PERMIT RENEWAL APPLICATION

Building Section - Development, Engineering, and Sustainability Department
105 Seymour Street, Kamloops, BC, V2C 2C6
P: 250-828-3554 | E: building@kamloops.ca

Project Address:		Original Permit No. BP:	
		Requested Extension Term (12 Month MAX):	
Reason for Permit Extension:			
CONTACT INFORMATION: New ownership may require additional information. Please contact the Building Section directly			
Applicant is:		☐ Owner	☐ Agent
Company Name: _____			
Contact Name: _____			
Address: _____			
		City	Province
		Postal Code	
Email: _____		Phone: _____	
CONDITIONS OF PERMIT EXTENSION			
1. This extension is for a period of <u>up to one year</u> (to be determined by the Building Official) from the original permit expiry date. Any work required to complete the project after the extension period may require a new building permit application and fees. 2. Payment of a renewal fee, as prescribed by the City of Kamloops <i>Fees and Charges Bylaw No. 44-14</i>, Schedule "C". Please include a cheque with your request, or once approved, make payment arrangements with the Building Section. 3. It is the responsibility of the owner/agent to call for the required inspections within the term of the permit extension. 4. This extension is also subject to the conditions under which the original permit was issued.			
Please Print Name (owner/agent)		Signature (owner/agent)	
Information collected on this form is done so under the authority of the <i>Freedom of Information and Protection of Privacy Act</i> . Personal information will only be used by authorized staff to fulfill the purpose for which it was originally collected, or for the use consistent with that purpose. For further information regarding the collection, use or disclosure of personal information, please contact the Privacy Officer at foi@kamloops.ca			
For Office Use Only:			
Last Inspection:	Type:	Date Completed:	
Permit Extension Approved:	☐ YES	☐ NO	
Original Building Official:	New Expiry Date:		
Original Permit Fee:	Extension Approved: (with conditions)		
Extension Fee (\$100 min) Date Paid:	Signature of Official	Date:	