

**EXTENSION RECORD**

<b>DATE:</b>
<b>CASE NUMBER:</b>
<b>OFFICER:</b>

<b>OWNER NAME:</b>
<b>ADDRESS:</b>
<b>HOME PHONE</b>
<b>2<sup>ND</sup> CONTACT NUMBER:</b>
<b>DAYS REQUESTING</b>
<b>REASON FOR EXTENSION:</b>

**PLEASE CALL 954-597-3425  
TO CONFIRM EXTENSION**

**OFFICE USE ONLY**

<b>APPROVED BY:</b>
<b>TYPE OF NOTICE EXTENDING:</b>
<b>NEW COMPLIANCE DATE:</b>

**PLEASE NOTE: EXTENSION IS NOT VALID UNLESS THIS FORM  
IS SIGNED AND APPROVED BY THE CODE ENFORCEMENT  
OFFICER.**