



REGULATIONS GOVERNING
PERMIT EXPIRATION AND EXTENSION

PINAL COUNTY COMMUNITY DEVELOPMENT DEPARTMENT
BUILDING SAFETY DIVISION
P.O. BOX 1610, FLORENCE, AZ. 85132
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(520) 866-6405 FAX (520) 866-6517
www.pinalcountyz.gov

INFORMATION
BULLETIN

008

March 2013

Permit expiration and extension requirements are covered in Sec. R105.5 of the **International Residential Code (IRC)**. Definitions and procedural information are provided below:

I. PERMIT EXPIRATION

Permits issued will expire within 180 days after issuance if no inspection has been performed. If the work is suspended or abandoned for a period of 180 days after the last inspection, the permit is considered expired. If your permit is due to expire a Permit Extension/Renewal Request Form must be filled out and submitted to our office **ON OR BEFORE YOUR EXPIRATION DATE TO AVOID RENEWAL FEES.** Please see attached.

II. PERMIT RENEWAL

A permit that has been expired for less than one year will be assessed a renewal fee of one half of the original permit fee. For example an original permit fee of \$1,400.00 would require a \$700.00 renewal fee. For a permit that has expired for more than one year, a full permit fee will be required.

III. INSPECTIONS

An issued permit is automatically extended for 180 days from the date of the last inspection. Incomplete inspections **do not** automatically extend a permit.

IV. EXPIRATION OF PLAN REVIEW (Permit applications that are in plan review and require corrections OR plans that have been reviewed and approved and have not been picked up.)

Corrected plans must be returned within 180 days to avoid having the application expire. Plans that have been reviewed and approved must also be picked up within 180 days of approval date to avoid expiration. Extension requests must be made in writing showing circumstances beyond control of the applicant. In order to renew a permit application after expiration, the applicant shall resubmit plans and pay a new plan review fee.

V. FEE REFUNDS

The Building Official may authorize a refund of no more than 80% of the permit fee (50% for pools/spa) provided no inspections have been performed and the permit has not expired. Permit fees are non-refundable after commencement of construction. Plan review fees are non-refundable after completion of the plan review.



PINAL COUNTY
wide open opportunity

REFUND REQUEST FORM

Pinal County
Department of Building Safety
P.O. Box 1610
Florence, AZ 85132

Date _____

Tracking/Plan # _____

Permit # _____

Project address _____

REASON FOR REQUEST:

It is understood that only 80% of the fees (50% for pools) may be refunded and I must submit along with this form, a copy of the permit (if applicable) and receipt to Building Safety. Permit fees are non-refundable after commencement of construction. Plan Review fees are non-refundable after completion of the plan review.

PLEASE MAIL REFUND TO: (please print)

Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Requestors' phone number: _____

Requestors' signature: _____

For Office Use Only

Approved: _____

Signature of Approving Authority

Refund = _____ % of _____ = _____



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Pinal County Community Development Department

BUILDING SAFETY DIVISION

Permit Extension/Renewal Request

Mail To: Pinal County Building Safety
P.O. Box 1610
Florence, AZ 85132
Attn: Permit Techs

Fax To: (520) 866-6517

Date: _____

Permit #: PER _____

Project Address: _____

A permit that has been expired for less than one year will be assessed a renewal fee of one half of the original permit fee. For example an original permit fee of \$1,400.00 would require a \$700.00 renewal fee. For a permit that has been expired for more than one year, a full permit fee will be required.

Due to the following circumstances, I am requesting that you extend/renew my permit for the allotted 180 days from date of expiration. (If more space is needed, please attach a separate page).

Preferred Method of Notification (circle one): Mail Fax Phone E-Mail
(Please specify preferred information below)

Name: _____

Mailing Address/City/State/Zip: _____

Email: _____ **Fax:** _____ **Phone:** _____

Signature: _____

For Office Use Only

Expiration Date: _____

Extended Until: _____

Renewal Fee: _____