This form must be submitted in person or via email to: econnect@leegov.com

To: Lee County Building Official

 P.O. Box 398

 Fort Myers, FL 33902

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, am requesting a completion on the following expired permit and address. The permit was issued to me as the (select one of the following):

[ ]  Owner/Builder\*\*

[ ]  Licensed Contractor

|  |
| --- |
| **Permit Number:** |
| **Job Address:** |
| **City, State & Zip:** |
| **Name (Owner/Builder or License Holder):** |
| **Company Name:** |
| **License Number:** |

I was unable to complete the work associated with the permit for the following reason(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please be aware of the following fees and items, which may be required for your Completion Request to be processed:

* Completion Fee
* Additional Impact Fees *(if applicable)*
* Signed Permit Information Board
* New Recorded NOC *(if original is expired)*
* Current Registration and insurance with Contractor Licensing *(for Licensed Contractors)*

Printed Name Signature Authorization\* Date

\*Requests submitted by a contractor must be signed by the license holder or authorized signer on file with Lee County.

\*\*Owner Builders must appear in person to complete this process.