



Expired Permit Reinstatement

Expired Permit #: _____

Reinstatement Fee \$75

Date Expired Permit Issued: ____/____/20____

Physical Address of Site: _____

Township: _____ N _____ W Section: _____ Block: _____ Lot: _____

Owner: _____ Primary Phone: _____

Contractor: _____ Primary Phone: _____

Reinstatement Date ____/____/20____

Owner / Contractor

Building Official