## CITY OF BELOIT DIVISION OF HOUSING SERVICES

## **REQUEST FOR EXTENSION OF TIME**

I, the undersigned, request an extension of time to comply with the orders received from

		regarding			
(Inspector's name)		(N	(Nature of violation and/or violation #)		
for the property located at			, Beloit, WI.		
I am requesting an additional days to			ays to cor	mply with the original orders.	
Reason for Request:					
Compliance Date (to	be determined b	y Inspector): _			
has lapsed with the ab	ove written agr	eement. I furth	ner under	ompleted on or before the extension time stand that failure to comply with this priate legal action being taken by the City	
Signature of Applicar	ıt	Phone numb	ber	Date Signed	
Print Name of Applic	ant				
Address					
City	State		Zip		
Approved by: Inspection Official, D 100 State Street Beloit, WI 53511 (608)364-6650	Pivision of Hous	ing Services		Date Approved	