

PERMIT WITHDRAWAL REQUEST FORM

Permit #:		
Site Address:		
I am (select one or	nly):	
□ The 0	The legal property owner The Oregon State Licensed Contractor An agent authorized to act on behalf of the Owner or Contractor	
I would like to with this permit has bee	draw this permit and can confirm that en done.	no work associated with
•	t by withdrawing this permit, as indicated with the permit with ermit in the future.	
Name	Signature	Date
Telephone	Email	
Please return this form building@tualatin.gov	by email to:	