



# Extension of Approval Request

**NOTE: THREE (3) COPIES** of all this application must be submitted by NOON on the deadline filing date. Otherwise this application will not be accepted. Separate applications are required for each application type.

## PLANNING COMMISSION

Type	Case Number	BOARD OF ZONING ADJUSTMENT
Zoning Change:	_____	Variance Case Number: _____
Planned Unit Development:	_____	_____
Subdivision:	_____	

LABELS: Two (2) mailing labels for the Applicant and the Owner  
(Application Fee + Postage Fee + \$ 1.00 Notification Fee per mailing label + \$ 1.00 Computer/Fax Fee = Total Application Cost)

1. \_\_\_\_\_  
**Applicant** (if other than owner, must furnish written authorization from owner)      Address \_\_\_\_\_

\_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

2. \_\_\_\_\_  
**Owner** (Submit evidence, such as deed or tax assessment, that the above person clearly has right of possession to the land area and any structures thereon)      Address \_\_\_\_\_

\_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

\_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

3. **Justification for Extension**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4. **Has a previous request for extension been made?**       No  Yes    If so, when? \_\_\_\_\_

5. **SIGNATURE:** It is warranted in good faith by the applicant whose name is signed hereto that all of the above facts are true and correct.

\_\_\_\_\_      \_\_\_\_\_  
Applicant Signature      Date