

TOWN OF WHITINGHAM

Zoning Application Extension

ONE-TIME, ONE-YEAR REQUEST FOR EXTENSION OF TIME

The fee for this application is \$10 plus a \$15 recording fee.

This is a LOCAL permit only. State permit(s) may be required.

Property Owner _____

Property Address _____

Original Application # _____ Original Expiration Date _____

Filed in Book # _____ Page # _____

Date Received _____ Fee Paid _____

The undersigned requests a one-time, one-year extension of time to complete the work approved under the original zoning application number listed above.

PERMISSION TO ENTER THE PROPERTY: Signing of this application authorizes the Zoning Administrator, Planning Commission, Zoning Board of Adjustment and/or Assessor and staff to enter onto the premises for the purpose of verifying the information presented.

The undersigned hereby affirms that all information presented in the original and this renewal application and all supporting forms, plans and documents is true, accurate and complete and agree that, if any such information is found to be false or misleading, any permit or other approval granted on the basis of such information shall be deemed null and void.

Property Owner Signature

Date

Applicant Signature

Date

Approved by ZA: _____ **Date** _____

NEW Permit Expiration Date _____

An interested person has the right to appeal the approval of this application within 15 days. The application becomes valid on the 16th day after approval.

This space reserved for recording in Land Records.