

Permit Extension

Columbia County Land Development Services
PERMIT EXTENSION APPLICATION

Note: an extension request **must** be filed before the original permit time limit expires.

TYPE OF PERMIT: ☐ Conditional Use Permit ☐ Resource Management Plan
☐ Variance ☐ Temporary Permit ☐ Non-conforming Use ☐ Partition/Subdivision

Other: _____

APPLICANT: Name: _____

Mailing address: _____ City+zip _____

Phone: _____ Email: _____

PROPERTY OWNER: (if different from above) _____

Mailing Address: _____ City+Zip _____

SITE ADDRESS: _____ City+Zip _____

Map/Taxlot: _____ **Acres:** _____ **Zoning:** _____

ORIGINAL FILE NO.: _____

ORIGINAL PERMIT APPROVAL DATE: _____

ORIGINAL PERMIT EXPIRATION DATE: _____

REASONS FOR EXTENSION: _____

PREVIOUS EXTENSIONS: _____

CERTIFICATION:

I hereby certify that all of the above statements, and all other documents submitted, are accurate and true to the best of my knowledge and belief.

Date: _____ Signature: _____

+++++

Planning Department Use Only

Original Fee: _____ Extension Fee (25% of original fee) _____

Date Rec'd: _____ Check No.: _____ Receipt No.: _____ Staff _____

DECISION: _____ **New Expiration Date:** _____

Comments: _____