## ST. MARY'S COUNTY DEPARTMENT OF PUBLIC WORKS & TRANSPORTATION PERMIT EXTENSION REQUEST FORM

DATE:		
APPLICANT:		
CONTACT PERSON:		PHONE:
1. PROJECT NAME:		2. PERMIT NO.:
3. TAX MAP REFERENCE:	4. ORIGINAL EXPIRATION DATE:	5. NO. OF PREVIOUS EXTENSIONS:
6. PUBLIC IMPROVEMEN	TS YET TO BE COMPLETED:	
7. DATE OF ANTICIPATEI	O COMPLETION OF BONDED IMPROVEM	ENTS:
	N REQUESTED:	
	-	
. ,		IC IMPROVEMENT OBLIGATIONS: (Please
Detailed):		
SIGNATURE OF		
REQUESTOR:		
TITLE:		

## **NOTICE:**

- A. This request must be signed by one having the authority to legally bind the Developer. A Power of Attorney must accompany any request signed by one who is not a President, Vice President, Treasurer or Secretary.
- B. \$60 permit extension fee.
- C. Extensions are not effective until approved by the Board of County Commissioners for St. Mary's County, Maryland. The County reserves the right to proceed on an action to enforce its rights under the agreement and bond during consideration of the extension.