



5400 West Civic Center Drive - Suite 1
Highland, UT 84003
Phone 772-4515 Fax 756-6903
Community Development Department

EXTENSION REQUEST APPLICATION

STAFF USE ONLY

Application Date: ___ / ___ / ___ Application Number: _____ Fee Owed: \$ _____

Received by: _____ Receipt #: _____ Cash/Card/Check (Check #: _____)

City Council Meeting Date: _____

Application: Approved/Denied Staff Comments: _____

PROJECT INFORMATION

Name: _____

Address: _____

Acreage/Property Size: _____

APPLICANT INFORMATION

Name: _____

Mailing Address: _____

Phone #: _____ Fax #: _____

Email Address: _____

Owner Information

Owner Name: _____

Owner Address: _____

Owner Phone #: _____ Owner Email Address: _____

Owner's Signature: _____



PROPERTY OWNERS AFFIDAVIT

I (we) _____, being first duly sworn, depose and say that I (we) am (are) the current owner of the property involved in this application; that I (we) have read the application and attached plans and other exhibits and are familiar with its contents; and that said contents are in all respects true and correct based upon personal knowledge.

Owner's Signature

Owner's Signature (co-owner, if any)

State of _____

County of _____

Subscribed and sworn to (affirmed) before me this _____ day of _____, 20____.

Notary Public

AGENT AUTHORIZATION AFFIDAVIT

I (we), _____, owner(s) of the real property located at _____, in Highland City, Utah, do hereby appoint _____, as my (our) agent to represent me (us) with regard to this application affecting the able described real property.

Owner's Signature

Owner's Signature (co-owner, if any)

State of _____

County of _____

Subscribed and sworn to (affirmed) before me this _____ day of _____, 20____.

Notary Public



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SUBDIVISION EXTENSION REQUEST

Final approval for a subdivision is effective for 180 days. An extension request must be filed prior to expiration of the 180 days. Extension request decisions are made by the City Council.

TO BE COMPLETED BY STAFF		REVIEW/SUBMITTAL ITEMS
YES	NO	
		Completed and Signed Planning Application.
		Extension Fees:
		\$62.50 Per Plat (\$62.50 x ____ Sheets) = \$ _____
		\$12.50 Per Lot (\$12.50 x ____ Lots) = \$ _____
		Total Extension Fees Due: \$ _____
		Narrative stating the reason for the extension request and explanation of when the project is anticipated to be started.

Signature: _____

Printed Name: _____

Date: _____

Phone Number: _____