## DEVELOPMENT PERMIT TIME EXTENSION APPLICATION



Date:	File Number:
Applicant's Name(s):	
Applicant's Mailing Address:	
l,	, herein request additional time to
complete the development for Development Permit	(FILE NUMBER)
on	(LEGAL LAND DESCRIPTION
Reason for time extension request:	
(APPLICANT'S SIGNATURE)	(APPLICANT'S SIGNATURE)
For office use only:	
☐ <b>Approved</b> - The applicant will be allotted mor	nths to complete the development.
Unless an additional Time Extension Application is app	proved, Development Permit
(FILE NUMBER) shall be deemed expired on	(MMM_DD_YY)
Up to two (2) extensions of one (1) year each may be g Development Authority. This is extension approval #_	•
☐ <b>Denied</b> - Reason for extension denial:	
Date:	
(PRINT NAME & TITLE)	(SIGNATURE)

The information on this form is being collected under the authority of section 33(c) of the *Freedom of Information and Protection of Privacy Act* and will be used solely for the purpose of Development Permit. If you have questions about this collection or require further information please contact Brazeau County, Box 77, Drayton Valley, Alberta, T7A 1R1 or telephone 780.542.7777.