

## TIME EXSTENSION REQUEST FORM

Development Permit / Subdivision Applications Planning and Development Services

			DATE:	
EXTENSION FOR: De	velopment Permit	□ Subdivision		
INITIAL APPLICATION	ROLL#	EXPIRY DATE	EXTENSION REQUESTER	D TO
ATE:				
IUMBER:	-   -	DATE	DATE	
			DAIL	
MUNICIPAL ADDRESS:				
LEGAL LAND DESCRIPTION:				
Lot:	Block:	Plan:		
Part of: □NE □ NW □SE □	☐SW 1/4 Section _	Township:	Range: West of:	M
APPLICANT / OWNER				
Applicant Name:				
Mailing Address:			Postal Code:	
Telephone:		Email:		
Landowner Name:			T	
Mailing Address:			Postal Code:	
Telephone:		Email:		
REASON FOR EXTENTION:				
Applicant/Owner Signature Date  Please forward completed and signed form to:  • Via Email: liz@rimbey.com  • Via Mail: Town of Rimbey  Box 350  Rimbey, Alberta, TOC 2J0				
	FOR OFFI	ICE USE ONLY		
EXTENSION DECISION:	I GRANTED TO:	Date	□ NOT GRANTED	
DECISION BY:		DATE OF DECISION:	<del></del>	