

Right of Way Occupancy Permit Extension Request

Permit Number		Date of Request	
Permittee/Owner(s) Full Name			
Email Address		Telephone No.	
Street Address	City	State	ZIP
Agent's Name (if applicable)			
Email Address		Telephone No.	
Street Address	City	State	ZIP
LOCATION OF PROJECT			
Canal or Levee Involved		County	
PERMIT HISTORY AND PREVIOUS EXTENSIONS			
What is the original permit issuance date?			
Has this permit been extended previously? If so, how many times?			
WORK STATUS			
Has the work commenced? <input type="checkbox"/> Yes <input type="checkbox"/> No		When is the work scheduled to commence?	
If Yes, on what date?		When is the work scheduled to be completed?	
Has a contract been executed for the proposed work? <input type="checkbox"/> Yes <input type="checkbox"/> No		Is the work subject to Section 408 authorization from the U.S. Army Corps of Engineers? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If Yes, what is the name and contact information for the contractor?		If Yes, has the authorization been granted? <input type="checkbox"/> Yes <input type="checkbox"/> No	
REASON FOR THE EXTENSION REQUEST			
Please provide a detailed narrative in the box below explaining why an extension of the permit is requested.			
NOTE: Either Permittee/Owner OR Agent can sign			
Permittee/Owner's Name (type or print)			
Permittee's Signature		Date	
Agent's Name (type or print)			
Agent's Signature		Date	