

**EXTENSION OF TIME OF SITE PLAN CONSTRUCTION WORK**  
**BOONE COUNTY PLANNING COMMISSION**

**SECTION A:** (To be completed by applicant)

**Fee Submittal - \$300.00**  
**(\$100.00 flat fee and \$200.00 inspection fee)**

1. Name of Development: \_\_\_\_\_

2. Address of Development: \_\_\_\_\_

3. Applicant: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Email: \_\_\_\_\_

4. Current Owner: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Email: \_\_\_\_\_

5. Site Plan Approval Date: \_\_\_\_\_

6. Date of Certificate of Occupancy/Compliance: \_\_\_\_\_

7. Current Zoning: \_\_\_\_\_

8. \_\_\_\_\_ Deed Book \_\_\_\_\_ Page \_\_\_\_\_ Group Number

9. Project Completion Date (extension period): \_\_\_\_\_

10. Reason For Extension:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

12. Applicant's Signature: \_\_\_\_\_

**SECTION B:** (To be completed by Planning Commission staff)

1. Date Received: \_\_\_\_\_

2. Received By: \_\_\_\_\_

3. Staff Reviewer: \_\_\_\_\_

4. Zoning Administrator Decision:

Approved (extension date): \_\_\_\_\_

Approved with condition(s) (list): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Denied (reasons): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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