## Mono County Community Development Department

P.O. Box 347 Mammoth Lakes, CA 93546 (760) 924-1800, fax 924-1801 commdev@mono.ca.gov

## **Planning Division**

P.O. Box 8 Bridgeport, CA 93517 (760) 932-5420, fax 932-5431 www.monocounty.ca.gov

## MAP EXTENSION APPLICATION

APPLICATION #	FEE PAID \$
DATE RECEIVED	RECEIVED BY
RECEIPT # CHECK #	(NO CASH)

APPLICANT/AGENT		
ADDRESS	CITY/STATE/ZIP	
TELEPHONE ()	E-MAIL	
OWNER, if other than applicant		
ADDRESS	CITY/STATE/ZIP	
TELEPHONE ()	E-MAIL	
Date of Planning Commission approval		APN
Date of Board of Supervisors approval		Minute Order #
Map expiration date	-	
PREVIOUS EXTENSIONS: Extension approv	ved	Expires
Second extension approved	Expires	
<b>REASON FOR REQUEST</b> : Applicant(s) show why an extension is necessary, using addition		

## APPLICATION SHALL INCLUDE:

- A. Completed application form.
- B. Project processing deposit: See Development Fee Schedule for Map Extension.
- C. If the environmental document is still valid and does not need modification by staff, no deposit. Otherwise, see Development Fee Schedule for the following Environmental Review deposits (CEQA) that may be required: Categorical Exemption, Negative Declaration, Environmental Impact Review (deposit for initial study only).

More on back...

Signature	Signature	Date
application form), AND THAT THE	FOREGOING IS TRUE AND CO	RRECT.
Attorney for this action (a nota	rized "Power of Attorney" docu	iment must accompany the
officer(s) empowered to sign for	the corporation, or $\square$ owner's	legal agent having Power of
(all individual owners must sign a		,,
I CERTIFY UNDER PENALTY OF I	PERJURY THAT I am: 🗕 legal ow	ner(s) of the subject property