

STATE OF FLORIDA DEPARTMENT OF TRANSPORTATION
APPLICANT TIME EXTENSION FORM

FORM 850-040-22
SYSTEMS PLANNING
04/93

**THIS FORM NOT FOR USE DURING THE CONSTRUCTION PHASE
AND SHALL BE KEPT WITH THE APPLICATION FILE**

PART 1: APPLICANT IDENTIFICATION

Project Name: _____
Application Number: _____
Applicant: _____
Telephone: () _____

PART 2: EXPLANATION OF TIME EXTENSION NEED

(ATTACH EXTRA SHEETS AS NECESSARY)

PART 3: APPLICANT CONCURRENCE AND SIGNATURE

With regard to the above referenced application, with full knowledge and understanding of my rights under Section 120.60(2), Florida Statutes, I hereby waive the right to have the application approved or denied by the State Department of Transportation within the 90 day time period prescribed by law. Said waiver is made freely and voluntarily by me, with full knowledge, and without any coercion by anyone employed by the State of Florida Department of Transportation. I also understand that this requested extension will give me extra time to supply new or corrected information.

Applicant's Signature _____ Date: _____
Applicant's Name Printed or Typed _____

PART 4: DEPARTMENT RECEIPT, CONCURRENCE & SIGNATURE

Printed Name of Staff Person: _____
Signature of Staff Person: _____
Date: _____
Agreed Upon "Follow-up" Date: _____
Notes or explanations: