



Application for Certificate of Appropriateness Extension

GLEN ROSE HISTORIC PRESERVATION COMMISSION

PROPERTY OWNER: _____

TELEPHONE NUMBER: _____

EMAIL ADDRESS: _____

MAILING ADDRESS: _____

PROPERTY ADDRESS: _____

DATE OF ORIGINAL APPROVAL: _____

REASON FOR EXTENSION REQUEST: _____

WORK COMPLETED TO DATE: _____

WORK REMAINING: _____

ON-SITE CONTACT Name: _____

Applicant Signature: _____

Approved

Den^{ed}

Historic Preservation Officer

- ❖ If approved this extension allows for work to be completed in the next 90 days. If work related to the original Certificate of Appropriateness (COA) is not completed within this time frame, a new COA for the remaining work will need to be submitted and approved.