REQUEST FOR EXTENSION OF SOIL EROSION AND SEDIMENT CONTROL PLAN CERTIFICATION PURSUANT TO P.L. 2008, CHAPTER 78 "Permit Extension Act of 2008"

To: FREEHOLD SOIL CONSERVATION DISTRICT

I hereby formally request extension of the soil erosion and sediment control under the provision of the Permit Extension Act of 2008, *as amended on September 21, 2012.*

	Date of Last Revision to		
5.	Date of Last Revision to Site Plan:		
4.	Address:		
3.	Project Owner Name(s):		
2.	SCD Application #:	RFA#	
1.	Name of Project:		

I certify that all revisions to the Soil Erosion and Sediment Control Plan have been previously certified by the District and agree as follows:

- a. Approval of this request will confer EXTENSION of the existing Soil Erosion and Sediment Control Plan and allow for continuation of the project.
- b. Extension Request extends the requirements of the previous application identified in # 2 above, which shall be appended herewith.
- c. All terms and conditions regarding compliance with this application and certified plan shall remain in effect including payment of all fees prescribed by the District fee schedule.
- d. That upon completion of the project, the District will promptly be notified. Authorization to occupy or otherwise utilize the project is conditioned upon District issuance of a Report of Compliance with the certified plan.
- e. Where changes to the application have occurred including ownership, a revised and signed application form shall be included with this request for Extension. If no revised application is forwarded, the applicant certifies that no changes to the Soil Erosion and Sediment Control Plan or Application have been made.
- f. Extension will only apply when there are <u>NO CHANGES</u> to the previously certified plan.
- g. Extension will not apply to projects located in "environmental sensitive areas," i.e. Highlands Region, Planning Area 4B and 5 and the Pinelands. Identify area of project.

Applicant Certification* (*If other than project owner, written authorization from owner must be attached)

Signature of Applicant	Date
Applicant Name (Print)	
Soil Conservation District	
This request has been: Granted / Denied	Extended until

Signature of District Official

Property Owner Authorization Form

Name of Project	
Block	
Lot	
Street Address	
Municipality	_
Property Owner's Name	
Property Owner's Company name (if applicable)	
Address	
Phone	
Applicant's Name	
Applicant's Name	
Applicant's Company Name (if applicable)	
Address	
Phone	
I,, authorize, Print Name of Owner)	(Print Name of Applicant)
To act on my behalf for the Soil Erosion and Sedin referenced property.	nent Control Application for the above
Signed	Date

(Signature of Property Owner)