

TOWN OF SOUTHAMPTON

Department of Land Management
Building and Zoning Division
116 HAMPTON ROAD
SOUTHAMPTON, NY 11968



JANICE SCHERER
TOWN PLANNING AND
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TOWN SUPERVISOR
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EXTENSION REQUEST
(\$150.00)

Date: _____

Building Permit or Electrical # _____

- Please Check One:
[] First Request
[] Second Request
[] Third Request
[] Fourth Request

Owner: _____
(Please Print)

Address: _____
(Please Print)

Email Address: _____
(Please Print)

Tax Map Number: _____

I hereby request a six (6) month extension for the above permit.

Applicant's Signature

For Official Use Only



Please Check One:

[] Approved

From: _____ To: _____

Approved by: _____

[] Disapproved

For Cashier's Use:

- [] Cash [] Check [] Money Order

Building Permit or Electrical # _____ has been

[] Approved [] Disapproved

- [] First Request New Expiration date _____
[] Second Request New Expiration date _____
[] Third Request New Expiration date _____
[] Fourth Request New Expiration date _____

Approved by _____

