



# Town of Barnstable Conservation Commission

230 South Street  
Hyannis Massachusetts 02601

**Form E**

Office: 508-862-4093

E-mail: [conservation@town.barnstable.ma.us](mailto:conservation@town.barnstable.ma.us)

## Extension Permit Request

SE3- \_\_\_\_\_ OOC expiration date: \_\_\_\_\_ Applicant Name: \_\_\_\_\_

Project Location \_\_\_\_\_ Map: \_\_\_\_\_ Parcel: \_\_\_\_\_

1. Why is extension being requested? \_\_\_\_\_  
\_\_\_\_\_
2. What parts of project are completed? \_\_\_\_\_  
\_\_\_\_\_
3. What parts of project are not completed? Include estimated completion date.  
\_\_\_\_\_  
\_\_\_\_\_
4. Are completed parts of project in compliance with the approved plan and Order of Conditions ? \_\_\_\_\_  
\_\_\_\_\_
5. Have special conditions been met to date? E.g. Forms A & B, photographs of undisturbed buffer, certified foundation plan? \_\_\_\_\_  
\_\_\_\_\_
6. How long is extension request for? \_\_\_\_\_
7. Are sediment controls in effective condition? \_\_\_\_\_
8. Have any previous Extension Permits been issued for this project? When?  
\_\_\_\_\_

\_\_\_\_\_  
**Representative's Signature**

\_\_\_\_\_  
**Date**

**Please submit this form, a cover letter, a \$ 125 check made payable to the Town of Barnstable, and an additional collated sets for distribution to the commissioners. Also, please email all materials to [Kimberly.cavanaugh@town.barnstable.ma.us](mailto:Kimberly.cavanaugh@town.barnstable.ma.us) .**