



Town of Medley
Building & Zoning Department

7777 NW 72nd Avenue Medley, Florida, 33166
Phone: 305-887-6913 Fax: 305-887-6928

Right of Way Permit
Extension Application

Date: _____ Permit Number: _____

Job Address: _____

Contact Person: _____ Phone: _____

E-mail: _____

Extensions are only allowed when the permit is still active.

There shall be a fee of \$125.00 for any permit extension.

To whom it may concern:

This letter is to request a 365-day extension on the above referenced permit number.

The reason for not completing the permit in 365 days is as follow:

Affidavit

I, _____ - _____, certify under penalties of perjury, that I have read the entire application and
(Print qualifier name) (Print Qualifier Title)
the above stated information is true and correct. _____ (Qualifier signature)

Sworn to and Subscribed before me by _____ who is personally known to me or has produced _____ as
identification, this _____ day of _____, 20_____.

_____ (Notary's signature and stamp)

Office Use Only

Approved By: _____ Date: _____

Permit Issued Date: _____

Last Inspection Date: _____

New Permit Expiration Date: _____