



PROJECT EXTENSION REQUEST

Staff Extension Board Extension

Contact Name and Phone Number: _____

Contract Number and Grantee Name: _____

Project Title: _____

Original Due Date: _____

Staff-Extended Due Date (if applicable): _____

(Note: Please attach a separate document if your responses don't fit within the given entry boxes)

Reason for Delay *(In as much detailed as possible, please note the percent of the project completed to date or the due diligence items completed to date for land acquisitions.)*

Resolution *(Explain how you plan to move forward with the project.)*

Large empty rectangular area for writing the resolution.

Revises Schedule and Expected Completion/Closing Date/Date of Final Report Submission
(subject to approval by GOCO)

Large empty rectangular area for writing schedule and completion details.

<i>For GOCO Use Only:</i> <input type="checkbox"/> Approved <input type="checkbox"/> Not Approved
Notes:
Signature: _____ Date: _____