

SECTION B: (To be completed by Planning Commission staff)

1. Date Received: _____ Fee Received: _____ Receipt #: _____

2. Number of Copies Received: _____

3. Is application complete: Yes No

4. Staff Reviewer: _____

5. Staff Action: _____ Date of Action: _____

_____ Approved

_____ Approved with Conditions (see #6)

_____ Denial (See #7)

6. Conditions of Approval: _____

7. Reasons for Denial: _____

8. 30 Day Action Deadline: _____

Boone County Planning Commission
Boone County Administration Building
2950 Washington Street, Room 317
P.O. Box 958
Burlington, Kentucky 41005
Phone: 859-334-2196 Fax: 859-334-2264
plancom@boonecountyky.org
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TIME LIMIT WAIVER REQUEST
BOONE COUNTY PLANNING COMMISSION

**Waiver of 30 day time requirement by applicant
and property owner for final planning commission action**

SECTION A: (To be completed by applicant)

1. Name of Project: _____

2. Location of Project: _____

3. Current Owner: _____

Address: _____

_____ City _____ State _____ Zip Code

Phone Number: _____ Fax Number: _____

Email: _____

4. Applicant: _____

Address: _____

_____ City _____ State _____ Zip Code

Phone Number: _____ Fax Number: _____

Email: _____

We, the applicant(s) and property owner(s) for the above referenced Site Plan application, waive the thirty (30) day time frame for Planning Commission action required by Section 3003 of the Boone County Zoning Regulations for said application. This time limit waiver is considered effective immediately upon receipt and approval by the Boone County Planning Commission and expires on: _____

It is understood that if the revised plans which address all outstanding requirements are not submitted by this date, the application may be denied in accordance with Article 30 of the Boone County Zoning Regulations.

ORIGINAL Property Owner's Signature: _____
(Faxed, Photocopied or Scanned Signatures will **NOT** be Accepted)

ORIGINAL Applicant's Signature: _____
(Faxed, Photocopied or Scanned Signatures will **NOT** be Accepted)

SECTION B: (To be completed by Planning Commission staff)

1. Date Received: _____
2. Original Site Plan Application Date: _____
3. BCPC Time Waiver Action: _____
4. BCPC Time Waiver Action Date: _____

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