



# Adams County Open Space Extension Request

<b>Date of Request:</b>	_____
<b>Grantee Name:</b>	_____
<b>Project Name:</b>	_____
<b>Contact Person:</b>	_____
<b>Phone Number:</b>	_____
<b>Email:</b>	_____

Original Project Due Date:	Requested Due Date: (No longer than 6 months)
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Please explain in detail the reason(s) for extending this project. Include information regarding progress made to date, items remaining to be completed and estimated timeline for completing all work.

Attach the following:

- Copy of original timeline submitted with grant application
- Revised timeline
- Evidence of progress (Photos of project or in narrative above)

Prepared by: \_\_\_\_\_ Date: \_\_\_\_\_

Print name: \_\_\_\_\_ Title: \_\_\_\_\_