



Application #: _____
 Fees Paid: _____
 Check #: _____
 Receipt #: _____

RECEIVED
 JUN 25 2021
 Planning/Zoning
 City of Laconia

PLANNING BOARD AND ZONING BOARD OF ADJUSTMENT
 EXTENSION REQUEST

Name of Applicant: Todd & Christine Kobelski Gregg & Lorri Kobelski

Mailing Address: 6 Farmstead WY Acton, MA 01720

Owner (If same as applicant, write "same"): _____

Mailing Address: _____

Tax Map/ Lot # (s): 169-270-10 Zoning District (s): SFR

Tax Map/ Lot # (s): _____ Application #(s): _____

Street Address: 23 SUMMIT AVE.

Project Name (If Applicable): _____

	Current Dates:	Requested Dates:
Plan Revisions:	<u>July 13</u>	<u>August 13</u>
Site Improvement Security:	<u>N/A</u>	_____
Mylar and/or Final Plans:	<u>August 3</u>	<u>September 3</u>
Completion:	<u>April 5 2022</u>	_____

Reason for Request: Surveyor working on plan revisions is too busy and wont be able to complete updated revisions until end of July

Sign as appropriate (If agent or non-person please attach certification)

NOTE: Please attach an Applicant Contact Worksheet

PROPERTY OWNER(S)

Todd Kobelski
 Printed Name Here

Signature of Property Owner(s)

06/25/2021
 Date

AGENT(S)

 Printed Name Here

 Signature of Agent(s)

 Date