



Wyoming State Engineer's Office

REQUEST FOR EXTENSION OF TIME

Surface Water Division
Herschler Building 2W
Cheyenne, Wyoming 82002

1. PERMITTEE INFORMATION:	
Names(s) of permit holder(s):	
Address:	
City:	State: Zip:
Telephone:	Cell Phone:
Email:	
Permit No.:	Facility Name:
2. HEREBY REQUESTS AN EXTENSION OF TIME IN WHICH TO:	
<input type="checkbox"/> Completion of Construction	
<input type="checkbox"/> Completion of Beneficial Use	
<input type="checkbox"/> Automatic Cancellation Date	
I would like to request an extension for _____ years. <i>(not to exceed 5 years)</i>	
3. REASON:	
The period of time is insufficient and additional time is requested to complete the remainder of work or application of water to Beneficial Use for the following reasons:	

(Signature)
Authorized person Permittee Agent

Date: _____

(Printed Name)

(Signature)
Authorized person Permittee Agent

Date: _____

(Printed Name)

(Signature)
Authorized person Permittee Agent

Date: _____

(Printed Name)