

NEVADA COUNTY COMMUNITY DEVELOPMENT AGENCY
PLANNING DEPARTMENT
ERIC ROOD ADMINISTRATION BUILDING
950 Maidu Avenue, Suite 170
Nevada City, California 95959-8617
(530) 265-1222

Filing Fee: \$ _____

REQUEST FOR AN EXTENSION OF TIME

Extensions of time for tentative maps and other land use permits can be requested pursuant to County or State codes but **they are not automatic** - specific findings must be made in order to approve an extension, including zoning and General Plan consistency. Extension Requests must be filed with the Planning Dept. prior to the expiration date of your project.

Please type or print legibly in black ink

AP#: 05-050-27 + 05-100-06 FILE NO.: FM 7-010

AMOUNT OF ADDITIONAL TIME REQUESTED: 18 MONTHS + 4 MONTHS = 22 MONTHS

DATE OF APPROVAL: 9/28/08 DATE APPROVAL EXPIRES: 9/28/23

HEARING BODY GRANTING APPROVAL: BOTH EXTENSION ARE STATE GRANTED

Name of Applicant: GLENN CHRIST

Mailing Address of Applicant: 126 PURDUE AVE KENSINGTON CA 94708

Telephone #: 510 5247825 E-Mail: GLENNCHR@COMCAST.NET

Name(s) & Address(es) of Property Owner(s): SAME

Name & address of Representative: _____

Telephone #: _____ E-Mail: _____

Street address of subject property: 16210 AMERICAN HILL RD. NEVADA CITY CA

Reason Extension of Time is needed (be specific; if adequate justification is not provided your request can be denied): PLEASE SEE ATTACHED FORMAL REQUEST FOR EXTENSION DATED 9/06/23

Signature of Applicant:  Date: 9/07/23

Note: If the applicant is not the property owner, a Letter of Authorization is required.

September 6, 2023
Mr. Tyler Barrington
Planning Department
County of Nevada
950 Maidu Avenue
Nevada City, CA 95959
Re: Final Map FM07-010

Dear Mr. Barrington,

Please accept this as my formal request for and County acknowledgement of the following extensions of time for my above referenced Final Map.

1. Pursuant to Gov't Code Sec. 65914.5 (AB1561), "**The Automatic State Granted Extension Due to the Covid Recession**" was automatically applied to my map on September 28, 2020. No affirmative action was required by myself or Nevada County to have made this 18 month extension fully applicable to my map on that date.
2. Pursuant to Gov't Code Sec. 66452.6(f)(1), A four month moratorium was created that extends my map by this period of time. In my effort to complete the County mandated conditions of approval I submitted Road improvement working drawings in January 2020. These Drawings required County review and approval before I could complete the County's required Condition. However, County documents show these working drawings took over 4 months to reach approval. (County Document dated January 14, 2020 states: "**Full review permit 20098...has been routed to applicable departments for review with an estimated due date of 1/28/2020.**") However, the County's history of this permit # 20098 shows the working Drawings were not approved for another four more months until May 30, 2020.

As you are aware, I have had many previous exchanges with your office and the County Counsel's office fully detailing the nature and relevant timelines of both extensions. Should you require another fully detailed explanation and timeline please let me know at your earliest convenience.

Please also acknowledge receipt and let me know the current required fee and if it needs to be submitted by September 8, 2023.

Thank you,
Glenn Christ
510 524-7825
glennch@comcast



**COUNTY OF NEVADA
COMMUNITY DEVELOPMENT AGENCY**

950 MAIDU AVENUE, SUITE 170, NEVADA CITY, CA 95959-8617
(530) 265-1222 FAX (530) 265-9854 <http://nevadacountyca.gov>

Agricultural Commissioner

Building Department

Environmental Health

Planning Department

Dept. of Public Works

AGREEMENT TO PAY FORM

Nevada County Community Development Agency fees are based on Board of Supervisor approved fee schedules. Hourly fees and fees for services in excess of a minimum fee collected, including re-inspections, are billed to the applicant based on the Board approved fee schedule in effect at the time the work is performed by staff. This *Agreement To Pay Form* must be signed and original signatures submitted to the NCCDA along with the completed permit forms and the initial payment of fees. Copies of current fee schedules are available from our Customer Service Staff or on the web at <http://nevadacountyca.gov>

I/We understand that the NCCDA will bill as services are rendered, and I/We agree to pay such billing within thirty (30) days of the mailing of such billing for the project/permit. If payments on outstanding invoices are not made within thirty (30) days after the date of the invoice, County staff may cease work on the project until the required payment is made, subject to any other provision of the law. All fees must be paid prior to the granting of any permits, approvals, or any land use entitlement for which services are required. The collection of fees, however, does not guarantee the granting of any permits, approvals, or land use entitlements for which I/We are applying.

Site Information:

Invoices and/or notices to be mailed to:

APN: 05 - 050 - 27	Name: GLENN CHRIST
Property Owner/Business Name (if applicable): GLENN CHRIST	Address: SAME
Address: 126 PURDUE AVE KENNINGTON 94702	Telephone: 510 524-7825
Email: GLENNCH@COMCAST.NET	Email: SAME

I would like to opt out of receiving County emails related to this project.

NCCDA Staff is authorized to consult with necessary governmental agencies and the following individuals concerning this project: _____

I certify under proof of perjury that I am the property owner or that I am authorized to enter into this fee agreement on his/her behalf. I have read the conditions concerning Nevada County Community Development Agency Fees and I understand that in the event that the billing party I have indicated does not pay required fees, I will be responsible for payment. I further agree to advise the department in writing should I no longer be associated with the above referenced project/property, rendering this agreement invalid as of the change of the date that the letter is received by the Nevada County Community Development Agency.

Signature: [Signature] Dated: 9/07/23 CDL# 50272572
 Printed Name: GLENN CHRIST Tel #: 510 524-7825

THIS SECTION FOR OFFICE USE ONLY

Service: _____	Program: _____	Job No: _____
DPW #: _____	Project File #: _____	Billing Code: _____
Amount Collected: \$ _____	Receipt #: _____	Date of Receipt: _____
Service: _____	Program: _____	Job No: _____
DPW #: _____	Project File #: _____	Billing Code: _____
Amount Collected: \$ _____	Receipt #: _____	Date of Receipt: _____