

**Notification Form for a Development Order Time Extension
Due to a State of Emergency, declared by the Governor for Hurricane Ian**

Due to the impact of **Hurricane Ian**, Executive Order 22-218 was issued by the Governor on September 24, 2022, declaring a State of Emergency for Palm Beach County. Based on Executive Orders 22-218, 22-268, 23-21, 23-60, 23-104, 23-139, 23-176, 23-214, 24-02, & 24-36 Section 252.363, F.S. authorizes a time extension for development orders of **585 tolling days plus 24 months**. The deadline to apply for this time extension is **July 29, 2024**.

- The declaration of a natural state of emergency issued by the Governor tolls the period remaining to exercise the rights of a development order for the duration of the emergency declaration.
- In addition to the tolling, the emergency declaration extends the period remaining to exercise the rights of a development order for 24 months.
- In cases where there are consecutive emergency declarations, if the period of tolling for two separate emergency declarations overlaps the period of the (tolling) overlap is counted only once and is not added together.
- The maximum extension for the period remaining to exercise the rights of a development may not exceed 48 months, applied retroactively to September 28, 2022. (*Ch. 2023-304, Laws of Florida*)

1. Control No. _____ Resolution No. _____ Application No. _____
PCN(s) _____

2. A time extension is sought for the following:

- Commencement of Development: Current Due Date _____
- Plat Recordation: Current Due Date _____
- Time-Certain Conditions of Approval:
Condition No. _____ Current Due Date _____
Condition No. _____ Current Due Date _____

3. APPOINTMENT OF AGENT (if any)

I (the owner) hereby authorize _____ to request a time extension pursuant to Section 252.363, F.S., and to make representations on my behalf. Consent to a firm shall be deemed consent for the entire firm, unless otherwise specified. Consent is valid for one year from date signed, unless less time is specified.

4. **OWNER**

_____	_____	_____
Signature	Corp. Title (if any)	Street Address
_____	_____	_____
Print Name of Signatory	Corp. Name (if any)	City, State, Zip Code
_____	_____	_____
Email Address	Telephone Number	

5. **AGENT**

_____	_____
Name of Agent	Name of Firm
_____	_____
Street Address	City, State, Zip Code
_____	_____
Email Address	Phone Number

The filing fee for each time extension application is **\$359**.

You may pay by check online or in-person with the PZ&B cashier.

For information, refer to the instructions on our webpage or contact the Monitoring staff at 561-233-5322.

This document is ADA compliant. Revised: 03/01/2024