

## Time Extension Request Public Assistance (PA) Grant Program

<b>General Grant Information</b>		
Applicant Name:	Disaster/Event Number:	Project Location:
PW Number:	Project Number:	Project Category:
Date of Request:	Original Period of Performance: <div style="text-align: center;">To</div>	
Extensions Previously Approved? <div style="text-align: center;">YES                      NO</div>	How Much Additional Time is Being Requested?	
Current Deadline Date:	New Proposed Deadline Date:	
<b>Work In Progress Information</b>		
Justification for Delay (Requires information describing extenuating or unusual circumstances, beyond the Applicant's control, that have resulted in the need for a time extension):		
<b>Michigan State Police, Emergency Management and Homeland Security Division Use ONLY Below:</b>		
Reviewer Signature:	Approved:  Denied:	Date: