



**REDEVELOPMENT AUTHORITY**  
*of the* **CITY OF LANCASTER**

# **EXTENSION REQUEST APPLICATION** **FOR BLIGHTED PROPERTY REMEDIATION**

**Contact Name:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Date of Agreement/Contract Expiration:** \_\_\_\_\_

**Date of Requested Expiration (extension date):** \_\_\_\_\_

**Why do you need this extension? (please be specific)**



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**STAFF USE ONLY**

**Staff Review Commentary:**

**Was a site visit/inspection performed by RACL?**

**YES**

☐

**NO**

☐

**Recommended Classification:**

**AT-FAULT**

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**NO-FAULT**

☐

**UNDEFINED**

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