**RESEARCH, DEVELOPMENT & TECHNOLOGY TRANSFER**

**NO-COST TIME EXTENSION REQUEST**

Wisconsin Department of Transportation

DT1243 9/2021

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| --- | --- | --- | --- |
| **WisDOT Research Program Category:**  Transportation Pooled Fund # | | | |
| Project title: | | | |
| Principal investigator: | | Phone: | email: |
| Administrative contact: | | Phone: | email: |
| WisDOT contact: | | Phone: | email: |
| WisDOT project ID: | Other project ID: | | Project start date: |

|  |
| --- |
| **Current project end date:** |
| **Requested project end date:** |
| **Number of extensions approved to-date:** |

**Reason for delay (check all that apply):**

Construction delay  Medical / personal emergency

Contract execution / signing delay  Test procedure review delay

Data access delay  Testing / data collection delay

Final report review / approval delay  Work plan / scope modification

Interim report review / approval delay  Other:

|  |
| --- |
| **General explanation for the delay (attach documentation if needed):** |
| **Steps taken to ensure completion by the requested project end date:** |

**X**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **X**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Principal investigator Signature Date Department chair or supervisor signature Date

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Print name and title Print name and title

FOR WisDOT USE ONLY

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Approval signature Date Print name and title