

APPLICATION FOR EXTENSION OF DURATION OF DEMOLITION

Section 197

To:			Permit Authority	Form			
			Address	760			
			Suburb/postcode	76C			
Applicant / Ow	ner details:						
Owner:							
Address:			Phone No:				
Note: Agents to be authority	orised in writing by the owner	Email address					
Owner builder:	Yes: (X if applicable)						
Agent:			Owner builder permit No:				
Address:			Phone No:				
		Email address					
Building Surve	yor details:						
Building Surveyor:			Category:				
Address:			Phone No:				
Licence No:		Email address:					
Details of Build	ling Permit:						
Address:			Permit No:				
			Date of Permit ex	cpiry:			
Extension request details:							

Current status and work still to be completed:

(Detail the current status of the building work to which the permit relates, and detail the building work still to be completed)

Length of extension request:							
6 months	9 months	12 months	Other				
(X applicable)							
Reason for extension:							
	is for the extension request -	- attach any re	levant supporting doo	cumentation)			
Owner / Agent:	Name: [print]		Signed:	Date:			
Owner / Agent: (Delete one not applicable)							
Building Surv	eyor to Complete:						
(Please provide advice/details regarding the work to enable the Permit Authority to assess this extension application as per Section 197(3)(a) of the Building Act 2016).							
	Name: [print]		Signed:	Date:			
Building Surveyor:							

Form No: I&DS.BLD.028

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