

APPLICATION FOR EXTENSION OF DURATION OF BUILDING PERMIT Section 147

To:					Permit Authority	Form
					Address	
					Suburb/postcode	76A
					,	
Applicant / Ow	ner details:					
Owner:						
Address:					Phone No:	
]	
Note: Agents to be auth	horised in writing by the owner]	Ema	ail address:		
Owner builder:	Yes: (X if applicable)					
Agent:					Owner builder permit No:	
Address:					Phone No:	
			Ema	ail address:		
Building Surve	evor details:					
Building Surveyor:					Category:	
Address:					Phone No:	
]	
Licence No:		Email a	 ddre	SS:		
Details of Build	ding Permit:					
Address:					Permit No:	
			Γ		Date of Permit e	xpiry:
Extension reg						

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 exte	ension 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:				
(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 147(3)(a) of the Building Act 2016).								
·	Name: [print]		Signed:	Date:				
Building Surveyor:								

Form No: I&DS.BLD.026

Director of Building Control - date approved: 1 July 2017 Document Set ID: 1089024 Version: 1, Version Date: 25/11/2020