

APPLICATION FOR EXTENSION OF DURATION OF BUILDING PERMIT

Section 147

		Permit Authority	Form
		Address	76A
		Suburb/postcode	
Applicant / Owne	er details:		
Owner:			
Address:		Phone No:	
		Fax No:	
Note: Agents to be authoris	sed in writing by the owner Email address:		
Owner builder:	Yes: (X if applicable)		
Agent:		Owner builder permit No:	
Address:		Phone No:	
		Fax No:	
	Email address:		
Building Surveyo	or details:		
Building Surveyor:		Category:	
Address:		Phone No:	
		Fax No:	
Licence No:	Email address:		
Details of Buildir	ng Permit:		
Address:		Pe	rmit No:
		Date of Permi	t expiry:
Extension reques	st details:		
-	work still to be completed:		
	atus of the building work to which the permit relate		1 '1 '' 1 ''1

	ension request:						
6 months	9 months	12 months	Other				
(X applicable)							
Reason for exter	nsion:						
(Detail the reasons for the extension request – attach any relevant supporting documentation)							
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	Namas [mrint]		Cianadi	Data			
Owner / Agent:	Name: [print]		Signed:	Date:			
(Delete one not applicable)							
Ruilding Survoyor to Complete:							
Building Surveyor to Complete: (Please provide advice/ details reading the work to enable the Permit Authority to assess this extension							
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