APPLICATION FOR EXTENSION OF DURATION OF DEMOLITION PERMIT

Section 197

To:		Permit Authority Form						
		Address 766						
		Address Suburb/postcode 76C						
Applicant / Ow	ner details:							
Owner:								
Address:		Phone No:						
		Fax No:						
Note: Agents to be auth	orised in writing by the owner Email address:							
Building Surve	yor details:							
Building Surveyor:		Category:						
Address:		Phone No:						
		Fax No:						
Licence No:	Email address:							
Details of Demo	olition Permit:							
Address:		Permit No:						
		Date of Permit expiry:						
Extension requ	est details:							
Current status and work still to be completed:								
(Detail the current status of the demolition work to which the above Demolition Permit relates, and detail the demolition work still to be completed)								
the demolition work	a still to be completed)							
Length of exter	acion roquect							
6 months	9 months 12 months	Other						
(X applicable)								
Reason for extension:								
(Detail the reasons	for the extension request – attach any relevant sup	porting documentation)						

	Name: [print]		Signed		Date	
Owner / Agent: (Delete one not applicable)						
, , , ,				ı		
Building Surveyor to Complete:						
(Please provide advice/ details reading 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:		i I				