APPLICATION FOR EXTENSION OF DURATION OF DEMOLITION PERMIT

Section 197

To:			Permit Authority Address Suburb/postcode	Form 76C				
Applicant / Ow	ner details:							
Owner:								
Address:			Phone No:					
			Fax No:					
-	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:							
	d 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)								
Length of exter	nsion request:							
6 months (X applicable)	9 months 12 mor	ths	Other					
Reason for extension:								
(Detail the reasons	for the extension request – attach any	γ relevant sup _l	oorting docume.	ntation)				

	Name: [print]	Signed	 Date
Owner / Agent: (Delete one not applicable)			

Building Surve	yor 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).							
Building Surveyor:	Name: [print]	Signed:	Date:				