APPLICATION FOR EXTENSION OF DURATION OF BUILDING PERMIT

Section 147

To:	Southern Midlands Council	Permit Authority Form
	PO Box 21	Address 76A Suburb/postcode
	Oatlands 7120	Suburb/postcode
Or Email r	mail@southernmidlands.tas.gov.au	
Applicant / Owi	ner details:	
Owner:		
Address:		Phone No:
		Fax No:
Note: Agents to be author	orised in writing by the owner Email add	ress:
Owner builder:	Yes: (X if applicable)	
Agent:		Owner builder permit No:
Address:		Phone No:
		Fax No:
	Email add	ress:
Building Surve	yor details:	
Building Surveyor:		Category:
Address:		Phone No:
		Fax No:
Licence No:	Email add	ress:
Details of Building Permit:		
Address:		Permit No:
		Date of Permit expiry:
Extension requ		
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: (Detail the reasons for the extension request – attach any relevant supporting documentation) Signed: Date: Name: [print] Owner / Agent: (Delete one not applicable) **Building Surveyor to Complete:** (Please provide advice/ details reading 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:**