



P O Box 21, Westport Phone: (03) 788 9112
 Fax: (03) 788 8041 www.bullerdc.govt.nz

P O Box 75, Reefton Phone: (03) 732 8821
 Fax: (03) 732 8822

DATE RECEIVED:

PROJECT NO:

REQUEST FOR EXTENSION OF TIME FOR BUILDING CONSENT BAM 022

SITE	Site/Location Address: (or Rapid Number):
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THE APPLICANT	If ownership has changed since the application was made, new evidence of ownership must be provided.	
	Applicant Name:	Contact person:
	Mailing Address:	
	Contact Phone:	

WORK / EXTENSION	Has building work commenced? <input type="checkbox"/> Yes <input type="checkbox"/> No
	Reason why extension of time is required:

SIGNATURE	I request an extension of time to complete the building work on the consent noted above. I understand there is a fee of \$25.00 payable for processing this application.	
	Signature: _____	Date: _____
	Print Name: _____	

INTERNAL OFFICE USE ONLY

Receipt Number & Date:	Invoice Number and Date:
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Extension Granted Yes No New Expiry Date: _____

If No, state reason why: _____

Approving Officer's Signature	Name	Position	Approval Date
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Administration			
<input type="checkbox"/> BAM 325 Letter sent	Date:	/ /	Initials: _____
<input type="checkbox"/> Computer status updated (incl new date)	Date:	/ /	Initials: _____

When complete, file with building consent on property file.