



APPLICATION FOR EXTENSION OF DURATION OF PLUMBING PERMIT

Section 173

To:

Permit Authority

Form

Address

Suburb/postcode

76B

Applicant / Owner details:

Owner/Agent:

Address:

Phone No:

Fax No:

Note: Agents to be authorised in writing by the owner

Email address:

Details of Plumbing Permit:

Address:

Permit No:

Date of Permit expiry:

Extension request details:

Current status and work still to be completed:

(Detail the current status of the plumbing work to which the above Plumbing Permit relates, and detail the plumbing 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)

Owner / Agent:

(Delete one not applicable)

Name: *[print]*

Signed

Date

Council Use Only

Permit No:		PID:	
Approved/Refused:		Date:	
Comments:			
Prescribed Council Fee:	\$		
Receipt No:		Date Paid:	