



WAIROA DISTRICT COUNCIL

REGULATORY DEPARTMENT

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APPLICATION FOR EXTENSION OF TIME

Section One | What Are You Applying For?

- Extension of time to issue Code Compliance Certificate
- Extension of time to commence works

Section Two | Where is the Building? *(Complete both fields)*

Street address: _____

Legal description: _____

Section Three | When/Where was The Building Consent Issued? *(Complete all fields)*

Building consent number: _____

Date issued: _____

Issued by: *(name of building consent authority)* _____

Section Four | Who Owns The Building? *(Complete all fields, using n/a if a field is not applicable)*

Owner name: *(include title, eg Mr, Ms if an individual/Contact person's name if a company, trust or similar)* _____

Owner mailing address: _____

Owner email address: _____

Owner contact number: _____

Section Five | Why is an Extension Required? *(Complete all fields)*

Reason: _____

New start date: _____

Expected completion: _____

Section Six | Signature *(Complete all fields)*

Owner name: _____

Signature: *(of owner/agent on behalf and with authority of the owner)* _____

Date: _____