REQUEST FOR WORK START EXTENSION   
TO BUILDING CONSENT

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| Send or deliver your application to: Building Consents Kāpiti Coast District Council  Private Bag 60601, Paraparaumu 5254 175 Rimu Road, Paraparaumu 5032  Toll Free: 0800 486 486 | **COUNCIL USE ONLY**  Received by:  Date:  Payment Amount:  Receipt No:  (attach a copy) |
|  |  |
| **THE BUILDING CONSENT** | |
| Building Consent Number: | |
| Building street address: | |

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| **REQUEST FOR EXTENSION** |
| **I request that you issue an extension on the above building consent for the following reasons:**  *(Please note: The maximum time when considering extensions is 12 months)* |
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| Requested time extension: |
| Postal address if different from building site location: |
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| **SIGNATURES** | |
| Name: |  |
| Signature: |  |
| Date: |  |

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| **EXTENSION FEE** |
| Please return this completed request together with the required fee of $110 to a Kāpiti Coast District Council Service Centre  Or  Pay by electronic transfer to (Council Bank Account Number: 03-0732-0306101-00) and quote the building consent number and property address in the reference fields |

**(NB: Notification of decision will be confirmed in writing)**

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| **OFFICE USE ONLY** | |
| Invoiced  Invoice Number: | |
| **Building Inspections Team Leader** | |
| Work Start Extension Granted  *Section 52* | |
| **or** Extension Declined | |
| Record reason for decision: | |
|  | |
| **Authorised by:** | |
| Name: |  |
| Signature: |  |
| Date: |  |
|  |  |
|  | Response letter completed |
|  | Letter, invoice & receipt sent to customer |
|  |  |
| Name: |  |
| Date: |  |