KAIPARA DISTRICT

Kaipara te Oranganui • Two Oceans Two Harbours

KAIPARA DISTRICT COUNCIL

Application for extension of time to complete building work

Requested under section 52 and section 93 of the Building Act 2004

THE BUILDING

Building consent number:		Date Issued:	
Street address of building:			
Legal description of land where building is located:			

THE OWNER

Name of owner: *(Include preferred form of address e.g. Mr. Miss. Dr if an individual)*			
Mailing address:		Postcode:	
Phone number: Work		After hours:	
Facsimile number:		Mobile:	
Email address:			

CONTACT PERSON (if different from above)

Name of contact:			
Mailing address:		Postcode:	
Phone number: Work		After hours:	
Facsimile number:		Mobile:	
Email address:			

Applicant: Please email this form to one of the following;

- *"your building consent number"***@kdc.abcs.co.nz** *(Example only.* ***18000@kdc.abcs.co.nz****)*, or
- **buildingsupport@kaipara.govt.nz**

EXTENSION OF TIME TO COMPLETE WORK *(section 93 of the Building Act 2004)*

Please explain why an extension is required to complete work; note extensions are considered on a case-by-case basis. (Attach letter if insufficient space to record reasons)

When do you expect the building work to be completed?	

WHAT THE BUILDING ACT 2004 SAYS

Code Compliance Certificate (CCC) s.93:

(1) A building consent authority must decide whether to issue a CCC for building work to which a building consent relates within;

(2)(b)(i) 2 years after the date on which the building consent for the building work was granted; or

(ii) any further period that may be agreed between the owner and the building consent authority concerned.

SIGNATURE

Name:

Signature: Owner: ☐ Agent: ☐ Date:

If you are signing this application on behalf of a company/trust/other entity (the agent), you are deciding that you are duly authorised to sign on behalf of the owner to make this application.

For Extension Fee: Please refer to current Fees and Charges under the website section “PAY IT”

COUNCIL USE ONLY *(tick box as applicable)*

EXTENSION TO COMPLETE BUILDING WORK

Extension of time to **COMPLETE** building work	☐ YES	☐ NO	☐ NA
Unforeseen delays: supply chain issues, material shortages, or a sudden lack of available licensed building practitioners (LBP's)	☐ YES	☐ NO	☐ NA
Personal or financial hardship: Major health issues, family emergencies, or unexpected financing delays that temporarily halt progress	☐ YES	☐ NO	☐ NA
Have there been any changes to the Building Code or legislation, which affect this application and or requires designs or plans to be amended??	☐ YES	☐ NO	☐ NA
Is a certificate for public use required? (Commercial only)	☐ YES	☐ NO	☐ NA
Are there any other safety issues or concerns?	☐ YES	☐ NO	☐ NA
Is a site visit required to verify details?	☐ YES	☐ NO	☐ NA
Revised completion date:			

Reason for decision:

AUTHORISING SIGNATURE

Name:

Signature: Date: