



**Application to Extend a Building Permit**

**\$400**

Applicant Name/s: \_\_\_\_\_  
 Postal address: \_\_\_\_\_  
 Telephone: \_\_\_\_\_  
 Email: \_\_\_\_\_  
 Contact Person: \_\_\_\_\_  
 Property Address: \_\_\_\_\_  
 Building Permit Number: \_\_\_\_\_

Reason for extension:

Estimated costs to complete the work: \$ \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Important to note:** only 12 month extensions will be considered and must be applied for prior to the Building Permit lapsing. If the permit has lapsed a new application for a Building Permit will be required.

Office Use Only			
Receipt no:		Date:	
Received by:		Paid:	\$

**Privacy**

Macedon Ranges Shire Council will only collect information from you with your knowledge and consent. Council will use personal information provided by you for the purposes for which it was collected. Personal information you provide to Council is protected by the Privacy and Data Protection Act 2014. Council will not disclose your personal information to a third party unless required by law.

**Payment options**

**In person:** present this form and payment (cash, cheque/money order, eftpos or credit card) at one of our Service Centres.

**By Mail:** cheque or money order – payable to Macedon Ranges Shire Council, or complete Credit Card payment authorisation over the page. Mail this form and payment to PO BOX 151 KYNETON VIC 3444.

**Credit card payment authorisation**

Mastercard  Visa

I authorise you to charge the following amount to my credit card: \$ \_\_\_\_\_

Name on card: \_\_\_\_\_

Credit card number: 

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Expiry date (xx/xx): \_\_\_\_\_ Signature: \_\_\_\_\_