

Local Government Consultation Request Form – Further Extension of Currency Period



Privacy Notice: Council is collecting the personal information you supply on this form for the purpose of processing your request. Council is authorised to do this under section 97 of the *Building Act 1975*. Council deals with personal information in accordance with law, including the *Information Privacy Act 2009*.

This form is to be completed when a Private Certifier wishes to extend the currency period for a development application (following the first extension) under section 85(1) of the *Planning Act 2016*. Please note, private certifiers are required to consult with the local government if they wish to further extend the currency period as per section 97 of the *Building Act 1975*.

P: 07 4932 9000 | E: enquiries@rrc.qld.gov.au | W: rockhamptonregion.qld.gov.au | PO Box 1860, Rockhampton 4700 | ABN: 59 923 523 766

| | | | |
|--|-----------------------|------------------------------|-----------|
| Private Certifier Details | | | |
| Private Certifier name: | | Contact person: | |
| Postal address: | | | |
| Preferred contact number: | | Email: | |
| Property Owner Details | | | |
| Owner name: | | | |
| Postal address: | | | |
| Existing Approval Details | | | |
| Council's application number: | | Private Certifier reference: | |
| Issue date: | Current lapsing date: | New proposed lapsing date: | |
| Site Details | | | |
| Street number and name: | | | |
| Suburb: | | State: | Postcode: |
| Lot number: | | Plan number: | |
| Request Information | | | |
| Reasoning/justification provided by the private certifier/owner for the extension: | | | |
| What is the current status of the approved work? <i>(for example, frame stage, not yet started)</i> | | | |
| Supporting Documentation | | | |
| Please remember to provide the following supporting documentation when submitting this form: | | | |
| <input type="checkbox"/> Any available inspection advice (for example, Form 16 – Inspection Certificate, Form 43 – Aspect Certificate (QBCC Licensee), Form 12 – Aspect Inspection Certificate (Appointed Competent Person)) | | | |
| <input type="checkbox"/> A copy of the private certifier/owner's request for the extension | | | |
| <input type="checkbox"/> Photos of the work (if started) | | | |
| Declaration | | | |
| I submit this form with the relevant supporting documentation as required. I declare that the details are correct to the best of my knowledge. | | | |
| Name: | | Signature: | Date: |

| | | | | |
|------------------------|-------------|-----------------|------------|------|
| OFFICE USE ONLY | Fee amount: | Receipt number: | Date paid: | CSO: |
|------------------------|-------------|-----------------|------------|------|