

INFORMATION REGARDING FORM

This is the approved form to apply for an extension of time to the compliance period. Extensions may be granted if the extension is reasonable in the circumstances.

RETURN YOUR COMPLETED FORM AND ALL REQUIRED DOCUMENTS BY:

Post: GPO Box 5099 Brisbane QLD 4001;
 Email: qbcc.saferbuildings@qbcc.qld.gov.au (all required documents must be scanned and attached); or
 In person: QBCC Queensland service centres are listed on our website.

Completing this form

- Use BLACK pen only
- Print clearly in BLOCK LETTERS
- DO NOT use correction fluid – any amendments should be crossed out and initialled

1. NATURE OF APPLICATION

<input type="checkbox"/> Initial application for an extension of time before the compliance period has ended	<input type="checkbox"/> Subsequent application for an extension of time before the extended compliance period has ended
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2. BUILDING DETAILS

Lot no	<input type="text"/>	Plan type	<input type="text"/>	Plan no	<input type="text"/>
Street address (include no., street, suburb/locality and postcode)	<input type="text"/>				
	<input type="text"/>			State	<input type="text"/>
			Postcode	<input type="text"/>	
Building name (if applicable)	<input type="text"/>				

3. BUILDING OWNER DETAILS

If the owner is a corporation, trust, body corporate/management body, an 'authorised representative' as a contact person must be shown.

Building owner's full name (e.g. if a Body Corporate - Body Corporate for XYZCTS123)	<input type="text"/>									
ABN/ACN	<input type="text"/>	If a company is the building owner, please provide ABN/ACN								
Contact person's full name (if owner is a company or body corporate)	<input type="text"/>									
*Postal address	<input type="text"/>									
	<input type="text"/>			State	<input type="text"/>	Postcode	<input type="text"/>			
(*All correspondence will be mailed to the nominated postal address)										
Contact phone	<input type="text"/>	Alternative contact no	<input type="text"/>							
Email	<input type="text"/>									
	<input type="text"/>									

4. BUILDING AGENT OR REPRESENTATIVE DETAILS (IF APPLICABLE)

If the owner is a company, trust, body corporate/management body, an authorised representative or agents details as a contact person must be shown. *Note if a new building owner wishes to engage an agent to act on their behalf they will be required to complete the proof of agency form.

Agent's full name

(Contact person's name - if company)

*Postal address

State Postcode

(*All correspondence will be mailed to the nominated postal address)

Contact phone Alternative contact no

Email

5. REASONS FOR APPLYING FOR AN EXTENSION TO THE COMPLIANCE PERIOD

Application for two weeks or less OR Application for two weeks or more

Proposed date D D / M M / Y Y Y Y

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As per the Regulation, please provide the circumstances for this extension to the compliance period.

Please attach all documents that support your reasons for applying for an extension to the compliance period.

IMPORTANT: Do not send original documents – the QBCC will not return any documents submitted.

