

East Gippsland Shire Council

273 Main Street (PO Box 1618)
Bairnsdale Vic 3875
Website www.eastgippsland.vic.gov.au
Email feedback@egipps.vic.gov.au
Follow us on Twitter @egsc



Telephone: (03) 5153 9500
Fax: (03) 5153 9576
National Relay Service: 133 677
Residents' Information Line: 1300 555 886
ABN: 81 957 967 765

Application for Extension of Time for Planning Permit

This application has a fee of \$213.80

Applicant Details:

Name:								
Business trading name: (if applicable)								
Postal address:								
				Postcode				
Phone number: Home:		Work:		Mobile:				
Email address:				Fax:				
What is the best way for Council to contact you?								
<input type="checkbox"/> Email		<input type="checkbox"/> Fax		<input type="checkbox"/> Phone – Home		<input type="checkbox"/> Phone – Work		<input type="checkbox"/> Phone - Mobile

Owners Details: (if not the applicant)

Name:								
Business trading name: (if applicable)								
Postal address:								
				Postcode				
Phone number: Home:		Work:		Mobile:				
Email address:				Fax:				

Permit Details:

Planning permit number:		Permit end date: ____/____/____						
Street number:		Street name:						
Town:				Postcode				
How long would you like the permit extended for? _____ years								

Privacy Statement

The East Gippsland Shire Council asks for details about you to collect rates, approve permits and licences, and run a range of community services. The information you give to us on this form is used only for the reasons set out in the form and is not given to anybody else. Sometimes we may supply details about you to someone else, but only if we are allowed by law, or to protect someone or property.

When information is given out, Council will always try to make sure your privacy is protected in line with the *Privacy and Data Protection Act 2014*. You may ask for more information about Council's Privacy Policy by contacting our Information Privacy Officer on 03 5153 9500 or e-mail feedback@egipps.vic.gov.au

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What is the reason/s you are applying for an extension? _____

You must give full details of your reasons for an extension of time and how long you wish to be extended. If you do not give enough information you may be asked to supply more, this will delay your application.

If you need more space or have more information, please attach with this form.

Please make sure that:

- Form is filled in fully and signed
- The correct fee is paid or payment enclosed
- Attached any supporting information or documents

Applicant signature:	
Name:	Date: ____/____/____
Owner signature: (if not the applicant)	
Name:	Date: ____/____/____

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Office Use Only:

Reference Number: AP/D/PP/_____ Method of Payment: Cash Cheque Credit Card Eftpos

Amount Paid: \$_____ Receipt Number: _____ Receipt Date: ____/____/____

Submitting your application:

Mail	Post the signed, completed form together with any applicable fees or copies of any documentation to; PO Box 1618 BAIRNSDALE VIC 3875.	
Electronic	Fax to 03 5153 9576 Email to feedback@egipps.vic.gov.au	
In Person	Bring the completed form and supporting documents to any of the following locations;	
	Service Centre Opening Hours: 8:30am to 5:00pm. Monday to Friday.	Bairnsdale Corporate Centre: 273 Main Street. Lakes Entrance Service Centre: 18 Mechanics Street. Omeo Service Centre: 179 Day Avenue. Orbost Service Centre: 1 Ruskin Street. Paynesville Service Centre: 55 The Esplanade.
	Mallacoota Service Centre Opening Hours: Monday and Tuesday 10.00am to 2.00pm Wednesday, Thursday, Friday 2.00pm to 5.00pm	Mallacoota Service Centre: 70 Maurice Avenue

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