



REQUEST FOR AN EXTENSION OF TIME

Site details

Crown allotment: _____ Lot number: _____ Plan number: _____

Street number: _____ Street: _____

Township/parish: _____ Postcode: _____

Applicant details

Surname: _____ Title: Mr Mrs Miss Ms Cr

First name: _____

Street: _____

Town: _____ State: _____ Postcode: _____

Phone numbers: Work: _____ Home: _____ Mobile: _____

Email: _____

Extension timeframe

Two years Other: _____ Planning permit number: _____

Reason why an extension of time is required

Application details – applicant declaration

Applicant signature: _____ Date: _____

Print name: _____

Loddon Shire Council
41 High Street, Wedderburn, Victoria
PO Box 21, Wedderburn, Vic 3518
Telephone: (03) 5494 1200 Facsimile: (03) 5494 3003
Email: loddon@loddon.vic.gov.au
Web: www.loddon.vic.gov.au

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