

# EXTENSION OF TIME CLAIM

Contract Number:   
Date:

## PARTIES

### Builder

Company Name:  ABN:

#### Notice details:

Address:   
Attention to:  Email:

### Customer (s)

Name (s):

#### Notice details:

Address:   
Attention to:  Email:

### Site Address

Address:

## Extension of Time (EOT) Details

The Builder claims an extension of time of the Date for Completion. EOT Claim No:

Description of delay:

  
  
  
  
  
  
  
  
  
  
  
  

Dates affected by delay:

Number of additional business days claimed by the Builder as a result of this delay:

New Date for Completion:

Estimate of costs likely to be incurred as a consequence of delay (inc. GST):

**Signed by or on behalf of the Builder:**

Signature:

Date of signature:

**Customer's Acceptance**

Note to Customer: You must indicate your acceptance or otherwise of the Builder's claim by completing, signing and returning this form, or similar written notice, to the Builder as soon as possible but within 10 Business Days of receiving the claim. Keep a copy for your records.

**Signed by Customer:**

Signature:

Date of signature:

ORIGINAL - BUILDER

1ST COPY - SUPERVISOR

2ND COPY - CUSTOMER