



KZN Public Works

Private Bag x

Department:
Public Works
PROVINCE OF KWAZULU-NATAL

Enquiries:
Tel: ()
Fax: ()
Email:
Ref:
Date :

Name and Postal Address of Contractor

Sirs

APPLICATION FOR EXTENSION TO THE PRACTICAL COMPLETION DATE:
WIMS NO _____: ZNQ _____ W: CITY/TOWN/PLACE: NAME OF
INSTITUTION: DESCRIPTION OF SERVICE:

I refer to your letter dated _____ addressed to _____,
wherein you applied for an extension to the Practical Completion date, refers.

I have to inform you that an extension* / a further extension* of _____
working days has been granted. The revised date to complete of this contract is
therefore _____.

It is again pointed out that the contract provision dealing with the penalty for non-
completion within the original practical completion date or any extensions granted
thereto will apply to the net delay on the contract.

Yours faithfully

HEAD : PUBLIC WORKS

**delete, whichever is not applicable*

Name and Postal address of Principal Agent *(if applicable)*

Sirs

Your letter of recommendation dated _____ has reference.

Yours faithfully

HEAD : PUBLIC WORKS

Project Manager :

Consultant Quantity Surveyor : _____ *(if applicable)*

Consultant Civil/Structural Engineer : _____ *(if applicable)*

Consultant Electrical/ Mechanical Engineer : _____ *(if applicable)*

District Office : _____

Projects Programme Manager : _____

Acquisition Management Sub-Directorate : Capture details of the extension on WIMS

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