



Water Resources Management Authority

APPLICATION FOR EXTENSION OF TIME FOR

AUTHORISATION TO CONSTRUCT WORKS

(To be submitted in triplicate)

(Rule 36)

I, (name)....., being the holder of Authorisation No., do hereby apply for an extension of time in order to complete the proposed works.

I confirm that all other particulars of the Authorisation remain the same.

The need to extend the period of time has been caused by (state cause)

.....

.....

Type of Water Use	Surface Water				Groundwater		Effluent Discharge	Swamp Drainage
	Diversion	Abstraction	In-stream Works	Storage	Shallow well	Borehole		
Tick Box								

PARTICULARS OF PERMIT APPLICANT	DETAILS
1. Full name of applicant(s) (In Block Letters)	2.
3. Category of Applicant - Individual, Group [Association, Society], Company, Institution	
4. ID Number of Applicant (Individual) or Certificate of Incorporation or Registration for Groups or Companies	
5. PIN Number (where available)	
Physical Address where water is to be used	Contact Address of Applicant
6. L/R Number(s)	7. Box Number
8. Village(s)/Ward(s)	9. Town
10. Sub-location(s)	11. Post Code
12. Location(s)	13. Telephone Contact (Landline)
14. Division(s)	15. Telephone Contact (Mobile)
16. District(s)	17. Email Contact

WATER RESOURCE DETAILS

18. Name of Body of Water or Aquifer where water is to be diverted, abstracted or stored	
19. Is the point of abstraction or storage in a Protected Area or a Groundwater Conservation Area? (yes/no)	
20. Sub-catchment Number	
21. Class of Water Resource	
22. Name of Body of Water or Aquifer where effluent is to be discharged	
23. Sub-catchment Number (Effluent)	
24. Class of Water Resource (Effluent)	
25. Status of Water Resource (Effluent)	
26. Category of Application (Class of Permit)	

The Chief Executive Officer,
 Water Resources Management Authority,
 P.O. Box 45250 – 00100
 NAIROBI



Form: WRMA 005
 Catchment: _____
 WRMA ID: _____
 File: _____

FEES SUBMITTED

Category A, B, C or D Class Application	Amount (KES)
Application Fees for Extension of Time of Authorisation	
Receipt Number	
Time Period for Construction	
Initial Authorisation Issued on (date)	
Authorisation Expiry Date	
Proposed Revised Authorisation Expiry Date	
Number of Times that Period of Authorisation has been revised	

SIGNATURE

Signature of Applicant or duly Authorised Agent	
Name	
Date of Application	

SIGNATURE OF WRMA OFFICIAL RECEIVING APPLICATION FOR EXTENSION OF TIME OF AUTHORISATION

Signature of WRMA Official	
Name	
Position	
Date Application for Renewal Received	

OFFICIAL SECTION

(To be filled in by WRMA officials)

WRMA Action	Decision	Date	Comment/Reference
Time Extension Accepted			
Rejected			
Conditional Acceptance			
Authorisation Valid until (date)			