

Application for a Building Permit Building Act 1993

Building Act 1993 Building Regulations 2018 Regulation 24

FORM 1

To: Glenelg Shire Council Building Surveyor

10. Gloricing Griffic Godinering Burlaning Gurveyor											
Owner or Agent Acting for Owner											
Name Owner/Agent											
Company Name:											
ARBN/ACN:											
Postal Address:											
Phone Numbers Busi	ness:				Mob	ile:					
Email:											
Address for serving or giving of documents:											
Indicate if the applicant is a application applies		lessee or licensee of Crown land to which this					Yes	No			
Contact Person:					Tele	phone:					
Ownership Details (if applicant is agent of Owner)											
Name of Owner:	Name of Owner:										
ARBN/ACN:											
Postal Address:											
Phone Numbers Busi	ness:				Mob	ile:					
Email:											
				- · ·							
				y Details							
Site Address:		Number: Street/Road:									
	Town		Postcode			de:					
Lot/s		LP/PS		Volume:				Folio:			
Crown Allotment:		Section		Parish		•		County:			
Municipal District			Allotment area M ² (for new dwellings only)								
Land owned by the C	rown o	r a Public A	uthority					Yes	No		
		Less	ee Responsibl	e For Buildi	ing W	ork					
Indicate if a lessee of the building, of which parts are leased by different persons, is responsible for the alterations to a part of the building leased by the lessee. Yes								No			
			Builders	s Details							
Name of Builder:											
ARBN/ACN:		Regist				ation No.					
Postal Address:											
Phone Business:					Mob	oile:					
Email:											
If the builder is carrying the major domestic building work and a co	uilding	contract sh	nowing the name	es of the par	ties to						

Yes

Copies Attached

Natural person for service	e of directions, not	tices and orde	rs (if builder is a boo	dy corporate)								
Name:												
Postal Address:												
Phone Numbers Business:	Mobile:											
Building Practitione	r or architect enga	ged to prepare	documents for this	permit								
List any building practitioner or architect engaged to prepare documents forming part of the application for this permit												
Name:	Catego	ory/Class	Reg	Registration No.								
Nati	ure of Building Wo	rk (tick applica	able works)									
Construction of a new build	ns to an existing Bu	ilding										
Demolition of a building	of a building											
Extension to an existing B	of Use of an existing	g building										
Construction of a swimmin	ction of a swimming	pool or spa ba	arrier									
Other (give details):												
Proposed use of Building:												
	Owne	r Builder										
I intend to carry out the work as ar	n owner builder:		Yes		No							
Owner Builder Certificate of conse	ent No:		Copy Supplied:	Yes	No							
	Cost of Br	uilding Work		·								
Is there a contract for the building	\$											
If No, state the estimated cost of the		Estimated price	\$									
(including the cost of labour and mat method of estimation.	erials) and attach de	etails of the	Copy Supplied:	Yes	No							
	ing Work: If applied	ation is to nor	mit a circle stage of v	work								
Stage No: 1 2	3 Other		tract price of Stage	\$								
oluge No. 1 2			indet prioc of olage	Ι Ψ								
Extent of Stage:												
2	Declaration b	y Owner/Ager	nt:									
I the owner / agent confirm that I h	nave read, complete	<u> </u>		Yes	No							
contained within this application f												
Has another Building Surveyor been previously appointed for these proposed works Yes No												
Person responsible for paying Lev	y: Applic	ant	Owner	Builder								
Signature of Owner or Agent:			Date:									
Delivery of permit: In Per	son Post	Email:										
The personal information requested on this the <i>Local Government Act 2020</i> . The Counpurposes. The information will not be discopersonal information that Council may have information if you can establish that it is not telephone 03 5522 2305.	cil will use this informat losed except as required to collected about you.	tion only for the s d or specifically a Also, you may red	pecific purpose of collect outhorised by law. You ma quest correction of your p	tion or for directly ay request access personal	related to any							
Glenelg Shire Council PO Box 152, PORTLAND VIC 3305 email: <u>building@glenelg.vic.gov.au</u>												
Phone: 1300 GLENELG (453 635) National Relay Service: 13 36 77 website: www.glenelg.vic.gov.au												