



# Application for a Building Permit

Building Act 1993  
Building Regulations 2018  
Regulation 24

## FORM 1

To: Glenelg Shire Council Building Surveyor

| Owner or Agent Acting for Owner             |  |            |  |
|---|--|------------|--|
| Name Owner/Agent                            |  |            |  |
| Company Name:                               |  |            |  |
| ARBN/ACN:                                   |  |            |  |
| Postal Address:                             |  |            |  |
| Phone Numbers Business:                     |  | Mobile:    |  |
| Email:                                      |  |            |  |
| Address for serving or giving of documents: |  |            |  |
| Contact Person:                             |  | Telephone: |  |

| Ownership Details (if applicant is agent of Owner) |  |         |  |
|--|--|---------|--|
| Name of Owner:                                     |  |         |  |
| ARBN/ACN:  |  |         |  |
| Postal Address:                                    |  |         |  |
| Phone Numbers Business:                            |  | Mobile: |  |
| Email:   |  |         |  |

| Property Details   |         |              |  |  |                          |           |                          |    |
|--|---------|--------------|--|--|--------------------------|-----------|--------------------------|----|
| Site Address:  | Number: | Street/Road: |  |  |                          |           |                          |    |
|  | Town:   |              |  |  |                          | Postcode: |                          |    |
| Lot/s  | LP/PS   |              | Volume:  |  | Folio:                   |           |                          |    |
| Crown Allotment:   | Section |              | Parish   |  | County:                  |           |                          |    |
| Municipal District   |         |              | Allotment area M <sup>2</sup><br><small>(for new dwellings only)</small> |  |                          |           |                          |    |
| Land owned by the Crown or a Public Authority  |         |              |  |  | <input type="checkbox"/> | Yes       | <input type="checkbox"/> | No |
| Lessee Responsible For Building Work   |         |              |  |  |                          |           |                          |    |
| 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. |         |              |  |  | <input type="checkbox"/> | Yes       | <input type="checkbox"/> | No |

| Builders Details |  |                  |  |
|------------------|--|------------------|--|
| Name of Builder: |  |                  |  |
| ARBN/ACN:        |  | Registration No. |  |
| Postal Address:  |  |                  |  |
| Phone Business:  |  | Mobile:          |  |
| Email:           |  |                  |  |

If the builder is carrying out domestic building work under a major domestic building contract, **attach an extract of the major domestic building contract** showing the names of the parties to the contract in relation to the proposed building work and a **copy of the certificate of insurance** if applicable.

Copies Attached  Yes  No

**Natural person for service of directions, notices and orders (if builder is a body corporate)**

|                                |  |                |  |
|--------------------------------|--|----------------|--|
| <b>Name:</b>                   |  |                |  |
| <b>Postal Address:</b>         |  |                |  |
| <b>Phone Numbers Business:</b> |  | <b>Mobile:</b> |  |

**Building Practitioner or architect engaged to prepare documents for this permit**

*List any building practitioner or architect engaged to prepare documents forming part of the application for this permit*

| <b>Name:</b> | <b>Category/Class</b> | <b>Registration No.</b> |
|--------------|-----------------------|-------------------------|
|              |                       |                         |
|              |                       |                         |
|              |                       |                         |

**Nature of Building Work (tick applicable works)**

|                          |  |                          |   |
|--------------------------|--|--------------------------|---|
| <input type="checkbox"/> | <b>Construction of a new building</b>          | <input type="checkbox"/> | <b>Alterations to an existing Building</b>            |
| <input type="checkbox"/> | <b>Construction of a small second dwelling</b> | <input type="checkbox"/> | <b>Extension to an existing Building</b>              |
| <input type="checkbox"/> | <b>Demolition of a building</b>                | <input type="checkbox"/> | <b>Removal of a building</b>                          |
| <input type="checkbox"/> | <b>Re-erection of a building</b>               | <input type="checkbox"/> | <b>Change of Use of an existing building</b>          |
| <input type="checkbox"/> | <b>Construction of a swimming pool or spa</b>  | <input type="checkbox"/> | <b>Construction of a swimming pool or spa barrier</b> |
| <input type="checkbox"/> | <b>Other (give details):</b>                   |                          |   |
| <input type="checkbox"/> | <b>Proposed use of Building:</b>               |                          |   |

**Owner Builder**

|  |                          |                       |                          |            |                          |           |
|--|--------------------------|-----------------------|--------------------------|------------|--------------------------|-----------|
| <b>I intend to carry out the work as an owner builder:</b> | <input type="checkbox"/> | <b>Yes</b>            | <input type="checkbox"/> | <b>No</b>  |                          |           |
| <b>Owner Builder Certificate of consent No:</b>            |                          | <b>Copy Supplied:</b> | <input type="checkbox"/> | <b>Yes</b> | <input type="checkbox"/> | <b>No</b> |

**Cost of Building Work**

|   |                                     |                                    |                        |    |
|---|-------------------------------------|------------------------------------|------------------------|----|
| <b>Is there a contract for the building work:</b>   | <input type="checkbox"/> <b>Yes</b> | <input type="checkbox"/> <b>No</b> | <b>Contract price</b>  | \$ |
| <b>State the estimated cost of the building work</b><br><i>(including the cost of labour and materials) and attach details of the method of estimation.</i> |                                     |                                    | <b>Estimated price</b> | \$ |

**Stage of Building Work: If application is to permit a circle stage of work**

|                         |                          |                          |                          |                          |                          |                          |          |                          |          |                          |                          |          |                          |                    |                                    |    |
|-------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|----------|--------------------------|----------|--------------------------|--------------------------|----------|--------------------------|--------------------|------------------------------------|----|
| <b>Stage No:</b>        | <input type="checkbox"/> | <b>1</b> | <input type="checkbox"/> | <b>2</b> | <input type="checkbox"/> | <input type="checkbox"/> | <b>3</b> | <input type="checkbox"/> | <b>Other _____</b> | <b>Cost of work for this stage</b> | \$ |
| <b>Extent of Stage:</b> |                          |                          |                          |                          |                          |                          |          |                          |          |                          |                          |          |                          |                    |                                    |    |

**Declaration by Owner/Agent:**

|  |                          |                  |                          |              |                          |                |
|--|--------------------------|------------------|--------------------------|--------------|--------------------------|----------------|
| <b>I the owner / agent confirm that I have read, completed and understood the details contained within this application form</b> | <input type="checkbox"/> | <b>Yes</b>       | <input type="checkbox"/> | <b>No</b>    |                          |                |
| <b>Has another Building Surveyor been previously appointed for these proposed works</b>  | <input type="checkbox"/> | <b>Yes</b>       | <input type="checkbox"/> | <b>No</b>    |                          |                |
| <b>Person responsible for paying Council fees/ levy:</b>   | <input type="checkbox"/> | <b>Applicant</b> | <input type="checkbox"/> | <b>Owner</b> | <input type="checkbox"/> | <b>Builder</b> |

|                                     |  |              |  |
|-------------------------------------|--|--------------|--|
| <b>Signature of Owner or Agent:</b> |  | <b>Date:</b> |  |
|-------------------------------------|--|--------------|--|

|                            |                          |                  |                          |             |                          |               |                          |
|----------------------------|--------------------------|------------------|--------------------------|-------------|--------------------------|---------------|--------------------------|
| <b>Delivery of permit:</b> | <input type="checkbox"/> | <b>In Person</b> | <input type="checkbox"/> | <b>Post</b> | <input type="checkbox"/> | <b>Email:</b> | <input type="checkbox"/> |
|----------------------------|--------------------------|------------------|--------------------------|-------------|--------------------------|---------------|--------------------------|

The personal information requested on this form is being collected by the Glenelg Shire Council for municipal purposes as specified in the *Local Government Act 2020*. The Council will use this information only for the specific purpose of collection or for directly related purposes. The information will not be disclosed except as required or specifically authorised by law. You may request access to any personal information that Council may have collected about you. Also, you may request correction of your personal information if you can establish that it is not accurate or complete. Such requests should be directed to Council's Privacy Officer on telephone 03 5522 2305.

|                               |                                  |   |
|-------------------------------|----------------------------------|---|
| Glenelg Shire Council         | PO Box 152, PORTLAND VIC 3305    | email: <a href="mailto:building@glenelg.vic.gov.au">building@glenelg.vic.gov.au</a> |
| Phone: 1300 GLENELG (453 635) | National Relay Service: 13 36 77 | website: <a href="http://www.glenelg.vic.gov.au">www.glenelg.vic.gov.au</a>         |