

Building Control Acts 1990 and 2007

Application for a Disability Access Certificate

Building Control Authority:

Fexg'Ectt qm'Ej lghHt g'Qhleg
Tipperary County Council,
Central Fire Station,
Limerick Road,
Nenagh.
Co. Tipperary

OFFICIAL USE

Date Received _____
Register Ref. _____
Entered on _____
Entered by _____
Fee Received _____

Application is hereby made under Part IIIB of the Building Control Regulations 1997 to 2009 for a Disability Access Certificate in respect of the works or building to which the accompanying plans calculations and specifications apply.

1. APPLICANT: Owner/ Leaseholder (delete as appropriate)

FULL NAME: _____

ADDRESS: _____

SIGNATURE: _____

TELEPHONE NO.: _____ DATE: _____

Owner of works or building (if different to above):

FULL NAME: _____

ADDRESS: _____

2. Name and address of person/s or firm/s to whom notifications should be forwarded (Owner/ Leaseholder or Designer/Developer/Builder):

3. Name and address of person/s or firm/s responsible for preparation of accompanying plans, calculations and specifications:

4. Address (or other necessary identification) of the proposed works or building to which the application relates:

5. Classification of works or building:

Construction of new building	<u>YES</u>	<u>NO</u>
Material alteration	<u>YES</u>	<u>NO</u>
Material change of use	<u>YES</u>	<u>NO</u>
Extension to a building	<u>YES</u>	<u>NO</u>

Brief description of building:

6. Use of proposed works or building:

(a) Existing use (where a change is proposed) _____

(b) New use _____

7. Has planning permission been applied for and granted for works or building?:

(a) Date permission was granted _____

(b) Planning Permission No. _____

8. In the case of

- (a)** Works involving the construction of a building, or a building the material use of which has been changed ---

Site area _____(sq. metres)

No of basement storeys _____

No of storeys above ground level _____

Height of top floor above ground level _____(metres)

Floor area of building _____(sq. metres)

Total area of ground floor _____(sq. metres)

- (b)** works involving an extension or the material alteration of a building:

Floor area of building extension _____(sq. metres)

Floor area of material alteration _____(sq. metres)

9. Amount of Fee (accompanying this application) € _____

This Application Form must be accompanied by a complete and certified set of drawings for the works or building.
