

Building Control Acts 1990 and 2007

Application for a Disability Access Certificate

Building Control Authority:

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 is being changed —

Site area _____ (sq. metres)

Number of basement storeys _____

Number 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.