

FORM OF APPLICATION FOR A DISABILITY ACCESS CERTIFICATE

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	YES	NO		
	Material change of use	YES	NO		
	Extension to a building	YES	NO		
	Brief description of building:				
6.					
	(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.				