

<b>PERMIT NO:</b>	<b>DATE ISSUED:</b>
<b>APPLICATION NO:</b>	<b>DATE RECEIVED:</b>

**SOUTHERN GRAMPIANS SHIRE COUNCIL APPLICATION FOR A BUILDING PERMIT**

**FORM 1** | Building Act 1993 | Building Regulations 2018 | Regulation 24

To: **Municipal Building Surveyor**

<b>From *Owner/*Agent of Owner:</b>		<b>*ACN/*ARBN:</b>	
Postal Address of Applicant:			
Address for Serving or Giving of Documents:			
Phone:		Email:	
<b>Is the applicant a:</b>			
Lessee or licensee of Crown Land to which this application applies? <b>YES</b> <input type="checkbox"/>			
Lessee of the building, of which parts are leased by different persons, responsible for the alterations to a part of the building leased by them? <b>YES</b> <input type="checkbox"/>			
<b>Ownership Details: (complete this section if the owner is not the applicant)</b>		<b>*ACN/*ARBN:</b>	
Name of Owner/s:			
Contact (if different to owner):			
Postal Address of Owner/s:			
Phone:		Email:	
<b>Property Details:</b>			
Number and Street/Road:			
City/Town and Postcode:			
Lot/s	LP/PS	Volume	Folio
C/A	Section	Parish	County
Municipal District:		Allotment Area (New Dwellings only) <b>m<sup>2</sup></b>	
Land is owned by the Crown or a public authority <b>YES</b> <input type="checkbox"/>			
<b>Builder:</b>		<b>*ACN/*ARBN:</b>	
Contact Name (if different):		Building Practitioner Reg. No.	
Postal Address of Builder:			
Email:		Phone:	
<i>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).</i>			
<b>*Natural Person for service of directions, notices and orders (if builder is a body corporate)</b>			
Name:		Phone:	
Postal Address:			
<b>List all Building Practitioners or Architects engaged to prepare documents for this permit</b>			
Name	Category/Class	Reg. No.	
Name	Category/Class	Reg. No.	
Name	Category/Class	Reg. No.	
<b>Nature of Building Work (Tick applicable or give other description)</b>			
<input type="checkbox"/> Construction of a new building		<input type="checkbox"/> Alterations to an existing building	
<input type="checkbox"/> Demolition of a building		<input type="checkbox"/> Removal of a building	
<input type="checkbox"/> Extension to an existing building		<input type="checkbox"/> Change of use of an existing building	
<input type="checkbox"/> Construction of a swimming pool or spa		<input type="checkbox"/> Construction of swimming pool or spa barrier	
<input type="checkbox"/> Re-erection of a building		<input type="checkbox"/> Other (give description)	
<b>Proposed use of Building:</b>			
<b>Owner-Builder details (if applicable)</b>			
I intend to carry out the work as an Owner-Builder <input type="checkbox"/> YES <input type="checkbox"/> NO		Owner-Builder Certificate of Consent No (if applicable):	
<b>Cost of Building Work:</b>			
Is there a contract for the building work?			<input type="checkbox"/> YES <input type="checkbox"/> NO
If YES, state the contract price			\$
If NO, state the estimated cost of building work (including cost of labour and materials) and attach details of estimation			\$
Floor area of New Building Work			<b>m<sup>2</sup></b>
<b>Stage of Building Work: (if application is to permit for a stage of building work)</b>			
Extent of Stage:		Cost of work for this stage: \$	
<b>Signature of Applicant (Owner/Agent)</b>			<b>Date:</b>

\*Delete if inapplicable

D/18/53458

1 July 2018