

Development & Environmental Services 19 Alexander Street BOTHWELL TAS 7030

Phone: (03) 6259 5503 Fax: (03) 6259 5722

OFFICE USE ONLY	
Application No.:	
Property ID No.:	
Date Received:	

BUILDING WORK Ise this form for: Section 130						
Notice of ' Application	Section 139					
	on for a Certificate of Likely Compliance on for a Building Permit					
- Application						
To:		Permit Authority Building Surveyo				
	19 Alexander Street	Address	Form			
	BOTHWELL TAS 7030	Suburb/postcode	9			
Application for:	Permit CLC Not	ice of Work	(X ones applicable)			
Certificate of Com	Detion (X to grant approval for certificate to be issued for	llowing the final i	nspection)			
Certificate of Com	pietion v		,			
	of Work Certificate and applicable fees must be suitssued, in accordance with section 153 or section					
Building Surve	yor details:					
Building Surveyor:		Category:				
Address:		Phone No:				
		Fax No:				
Licence No:	Email:					
Applicant / Owi	ner details:					
•	or agent of the owner may make an application					
Owner:		Contact person:				
Address:		Phone No:				
		Fax No:				
Email address:						
Owner builder:	Yes: (X if applicable) Owner Builder Permit:					
Names:		Contact person:				
Contact address:		Phone No:				
		Fax No:				
Email address:						
Agent:		Contact person:				
Address:		Phone No:				
		Fax No:				
Email address:						

Note: Agents to be authorised in writing by the owner

Details of building work:						
Type of work: (X one applicable)	Permit work		Notifiable	e work	Planning appr	oval granted (if applicable)
Address:					Certificate of title	No:
Description of work:					(new building / alterat	tion / addition / repair
Use of building:					(main use) Building	g class(es):
Other details:						
Area: m²	existing buildi	ng floor:		new floor:	la	and:
Material:	floor:	walls:		roof:	frai	me:
Value of work: \$ [inclusive of GST]		cont	ract price: (X one ap	estimate:	No. of dwelling	units:
Duilding Contin	oo Drovidor dot	oilor				
Building Servic	es Provider det	alis.			C-t	
Architect - Designer: Business name:					Category:	
Business address:					Phone No:	
					Fax No:	
Licence No:			Email:			
Building - Designer:				Catego	ry:	
Business name:						
Business address:					Phone No:	
					Fax No:	
Licence No:			Email:			
Engineer - Designer:					Category:	
Business name:						
Business address:					Phone No:	
					Fax No:	
Licence No:			Email:			
Services - Designer:					Category:	
Business name:						
Business address:					Phone No:	
					Fax No:	
Licence No:			Email:			
Builder:					Category:	
Business name:						
Business address:					Phone No:	
					Fax No:	
Licence No:			Email:			

Documents and c	ertificates provided:			
The following specified of	documents and certificates are pro	vided with this	application -	
Docui	ment or certificate description:	Prepared by: (Licence No. if applicable)		
Certificate of Likely Co	mpliance: the Director's Specified List			
_	vill be carried out in accorda I the National Construction Cod		Building Act 2010	6, the Building
	Name: [print]		Signed	Date
Owner / Agent: (Delete one not applicable)				