



Development & Environmental Services  
19 Alexander Street  
BOTHWELL TAS 7030

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

**OFFICE USE ONLY:-**

Application Number: \_\_\_\_\_  
Property ID Number: \_\_\_\_\_  
Date Received: \_\_\_\_\_

**APPLICATION - FOR BUILDING PERMIT**

**Section 139**

To:  *Permit Authority*  
 *Address*  
  *Suburb/postcode*

Form **2**

**Applicant / Owner details:**

*Note: Only an owner or agent of the owner may make an application*

**Owner:**   
Address:   
    
Email address:

Contact person:   
Phone No:   
Fax No:

**Owner builder:** Yes:  (*X if applicable*) Owner Builder Permit:   
Names:   
Contact address:   
    
Email address:

Contact person:   
Phone No:   
Fax No:

**Agent:**   
Address:   
    
Email address:

Contact person:   
Phone No:   
Fax No:

*Note: Agents to be authorised in writing by the owner*

**Building Surveyor details:**

Building Surveyor:   
Address:   
    
Licence No:  Email:

Category:   
Phone No:   
Fax No:

**NOTE:** If you would like Council's Building Surveyor to review the plans and issue a Certificate of Likely Compliance please sign the "Council's Building Surveyor" section at the end of this application form.

**Details of building work:**

Address:   Certificate of title No:   
Description of work:  (*new building / alteration / addition / repair / re-erection / other*)  
Use of building:  (*main use*) Building class:

**Other details:**

Area: m<sup>2</sup> existing building floor:  new floor:  land:   
Material: floor:  walls:  roof:  frame:   
Value of work: \$  contract price:  estimate:  (*X one applicable.*)  
[inclusive of GST] No. of dwelling units:

**Building Services Provider details:**

<b>Architect - Designer:</b>	<input type="text"/>	Category:	<input type="text"/>
Business name:	<input type="text"/>		
Business address:	<input type="text"/>	Phone No:	<input type="text"/>
	<input type="text"/>	Fax No:	<input type="text"/>
Licence No:	<input type="text"/>	Email:	<input type="text"/>
<b>Building - Designer:</b>	<input type="text"/>	Category:	<input type="text"/>
Business name:	<input type="text"/>		
Business address:	<input type="text"/>	Phone No:	<input type="text"/>
	<input type="text"/>	Fax No:	<input type="text"/>
Licence No:	<input type="text"/>	Email:	<input type="text"/>
<b>Engineer - Designer:</b>	<input type="text"/>	Category:	<input type="text"/>
Business name:	<input type="text"/>		
Business address:	<input type="text"/>	Phone No:	<input type="text"/>
	<input type="text"/>	Fax No:	<input type="text"/>
Licence No:	<input type="text"/>	Email:	<input type="text"/>
<b>Services - Designer:</b>	<input type="text"/>	Category:	<input type="text"/>
Business name:	<input type="text"/>		
Business address:	<input type="text"/>	Phone No:	<input type="text"/>
	<input type="text"/>	Fax No:	<input type="text"/>
Licence No:	<input type="text"/>	Email:	<input type="text"/>
<b>Builder:</b>	<input type="text"/>	Category:	<input type="text"/>
Business name:	<input type="text"/>		
Business address:	<input type="text"/>	Phone No:	<input type="text"/>
	<input type="text"/>	Fax No:	<input type="text"/>
Licence No:	<input type="text"/>	Email:	<input type="text"/>

**Documents and certificates provided:**

The following specified documents and certificates are provided with this application -

<i>Document or certificate description:</i>	<i>Prepared by: (Licence No. if applicable)</i>
Certificate of Likely Compliance:  3 Copies of documents specified in the Director's Specified List	

The building work will be carried out in accordance with the *Building Act 2016, the Building Regulations 2016* and the National Construction Code.

Owner / Agent:     
(Delete one not applicable)

**COUNCIL'S BUILDING SURVEYOR**

If you would like Council's Building Surveyor to review the plans and issue a *Certificate of Likely Compliance* please sign below.

I request that Council's Building Surveyor review the plans submitted and application is made for a Certificate of Likely Compliance.

Owner / Agent:     
(Delete one not Applicable)