

APPLICATION FOR BUILDING PERMIT VARIATION (FORM 1)
Building Act 1993 Building Regulations 2018 – 24

To: Leonard Dowell (Reg No BS-U1112)										
From: I am making this application for a building					<input type="checkbox"/> Owner of Land		<input type="checkbox"/> Agent of Owner			
Name:					ACN/ARBN					
Postal address:							Post Code			
Contact Person:					Mobile					
Telephone (BH):					Email:					
Address for serving documents:		<input type="checkbox"/> As Above		Other:						
Indicate if the applicant is a lessee or licensee of Crown land to which this application applies							Tick if applicable: <input type="checkbox"/>			
Correspondence method		<input type="checkbox"/> - Email Correspondence (to applicants email address)			<input type="checkbox"/> - Post (further postal fee's apply)					
Lessee responsible for building work										
Indicate if a lessee of the building, of which parts are leased by different persons, is responsible for the alterations to a part of the building leased by that lessee							Tick if applicable: <input type="checkbox"/>			
Ownership Details (Please state ALL owners of the property)										
Owner's full name:					ACN/ARBN					
Postal Address:							Post Code:			
Contact Person:					Mobile:					
Telephone (BH):					Email:					
Builder Details										
Company Name:					ACN/ARBN:					
Postal address:							Post Code:			
Contact Person:					Mobile:					
Telephone (BH):					Email:					
Architect / Draftsman Details										
Company Name:										
Postal address:							Post Code:			
Contact Person:					Mobile:					
Telephone (BH):					Email:					
Property Details										
Lot/s:		Number:		Street/Road:						
Suburb:					Postcode:				LP/PS:	
Volume:		Folio:			Crown Allotment:				Section	
Parish:					County:					
Municipal District:					Allotment Area (for new dwellings only):				M²	
Land owned by the Crown or a public authority. Tick if applicable: <input type="checkbox"/>										

Nature of building work – Please provide a full description of all works to be carried out		
<input type="checkbox"/> Construction of a new building	<input type="checkbox"/> Alteration to an Existing building	<input type="checkbox"/> Removal of a building
<input type="checkbox"/> Demolition of a building	<input type="checkbox"/> Extension to an Existing building	<input type="checkbox"/> Re-erection of a building
<input type="checkbox"/> Construction of swimming pool or	<input type="checkbox"/> Construction of swimming pool or	<input type="checkbox"/> Change of use of an existing building
<input type="checkbox"/> Other: (give description)		
Proposed Use of Building		

Building practitioners ¹ and/or architect

a) to be engage in the **building work** ² (If a registered domestic builder carrying out domestic work, attach details of the required insurance.)
*** Complete a) with builder or demolisher whom will be undertaking the work**

Name:		Category/class		Registration No:	
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(b) who were engaged to **prepare documents** forming part of the application for this permit ³
*** Complete b) with architects, draftsperson, engineers, building surveyor whom prepared/designed documents for this application**

Name:		Category/class		Registration No:	
Name:		Category/class		Registration No:	
Name:		Category/class		Registration No:	
Name:		Category/class		Registration No:	

Details of Variation

Please list details of variations and associated cost:

Cost of works for variation:	\$
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Please note: Additional fee's will be calculated upon receipt and assessment of documents

I/We have read & fully understand the Conditions & Terms of Engagement specified on the following pages & accept responsibility for the payment of all fees incurred in the processing of the Building Application.

Signature of owner/agent:		Date:	
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I/We have read & fully understand the Conditions & Terms of Engagement specified on the following pages & accept responsibility for the payment of all fees incurred in the processing of the Building Permit Variation

Signature of owner/agent		Date:	
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