

Application for a Revised Disability Access Certificate

Building Control Acts 1990 and 2007

Building Control Authority

OFFICE USE ONLY

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 Revised Disability Access Certificate in respect of proposed works or building to which the accompanying plans, calculations and specifications apply.

Original Disability Access Certificate application Reference No.

Reason for Revised Disability Access Certificate application

Planning Permission Reference No.

1 Applicant: Owner/Leaseholder (delete as appropriate)

Full name

Address

Signature

Tel No.

Date

Owner of works or building (if different to above)

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 Description of changes to the proposed works or building from original application

6 Site area

	(sq. metres)
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Original application

Revised application

Number of basement storeys

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Number of storeys above ground level

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Height of top floor above ground level

	(metres)
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	(metres)
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Floor area of building

	(sq. metres)
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	(sq. metres)
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Total area of ground floor

	(sq. metres)
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	(sq. metres)
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7 Amount of Fee (accompanying this application) €

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Revised set of working drawings must accompany this application