



WEST WIMMERA SHIRE COUNCIL

FORM 1

Regulation 24

Building Act 1993
Building Regulations 2018

APPLICATION FOR A BUILDING PERMIT

To Relevant Building Surveyor

From

*Owner/*Agent: _____

*ACN/*ARBN: _____

Postal address of applicant: _____

_____ Postcode: _____

Email: _____

Address for serving or giving of documents: _____ Postcode: _____

Indicate if the applicant is a lessee or licensee of Crown land to which this application applies *t*

Contact person: _____ Telephone: _____

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 *t*

***Ownership details** (if applicant is agent of owner)

Name of owner(s): _____

*ACN/*ARBN: _____

Postal address: _____

_____ Postcode: _____

Contact person: _____ Telephone: _____



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Property details

Street/road: _____ City/suburb/town: _____ Postcode: _____
Number: _____

Lot/s: _____ LP/PS: _____ Volume: _____ Folio: _____

Crown allotment: _____ Section: _____ Parish: _____ County: _____

Municipal district **West Wimmera Shire Council** Allotment area (for new dwellings only): _____

Land owned by the Crown or a public authority

[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).]

Builder

Name: _____ Telephone: _____

*ACN/*ARBN: _____

*Building practitioner
Registration no.: _____

Postal address: _____
Postcode: _____

[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).]

*Natural person for service of directions, notices and orders (if builder is a body corporate)

Name: _____ Telephone: _____

Postal address: _____ Postcode: _____

Building practitioners and/or architect [List any building practitioner or architect engaged to prepare documents forming part of the application for this permit.]:

Name	Category/class	Registration no.



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Nature of building work

- | | | | | | |
|--------------------------------------|--------------------------|---|--|--------------------------|---|
| 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"/> | † |
| Re-erection of a building | <input type="checkbox"/> | † | Construction of swimming pool or spa barrier | <input type="checkbox"/> | † |
| Construction of swimming pool or spa | <input type="checkbox"/> | † | | | |
| Other [give description] | <input type="checkbox"/> | † | | | |

Proposed use of building: _____

*Owner-builder

I intend to carry out the work as an owner-builder.

Yes / No

Owner builder certificate of consent no. (if applicable)

Cost of building work

Is there a contract for the building work?

Yes / No

If yes, state the contract price

\$ _____

If no, state the estimated cost of the building work (including the cost of labour and materials) and attach details of the method of estimation

\$ _____

Stage of building work

If application is to permit a stage of the work—

Extent of stage: _____

Cost of work for this stage:

\$ _____

Signature: _____

Date: _____

* Delete if inapplicable

† Tick if applicable