

Unit 4/5 Rocla Road, Traralgon 14A Wade Court, Sale P.O Box 1781, Traralgon 3844, Email: admin@b4ubuild.net.au Phone: 1300 380 708

APPLICATION CHECKLIST – Demolition

Building Act 1993, Building Regulations 2018

Copies Required	Document	Tick	
1	Application Form (Form 1) – Which includes letter of appointment letter/consent to act.		
1	Current Certificate of Title and Plan sub-division (Printed within the last 60 days).		
1	Section 29 – Consent to undertake demolition work from the relevant Council (where required)		
1	Copy of Town Planning Permit and council endorsed plans (where required)		
1	Demolition plan showing all buildings being demolished including setbacks from site boundaries and nearby neighbouring buildings.		
1	Demolition Method Statement (step by step method of demolition)		
1	Hazardous Material Report		
1	Copy of Demolisher's Public Liability Insurance.		
1	Demolisher's Name, Registration Number, Postal Address and Phone Number		
	Fees (to be paid prior to the issue of the Building Permit) Cash, Cheque, or Direct Deposit		

No Works are to commence on the allotment prior to the issue of a Building Permit.

Building applications can be personally lodged between 9.00am - 5.00pm weekdays

We are happy to discuss your projects and any other requirements at a preliminary design stage. Feel free to ring us on 1300 380 708 or call into our office.

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Stephen Bond Director/Building Surveyor BS-L 36361



FORM 1

Regulation 24 **Building Act 1993** Building Regulation 2018

APPLICATION FOR A BUILDING PERMIT

To: B4UBuild Building Consultants

From:

Owner/Agent of Owner:	
Postal Address:	Postcode:
Contact Person:	Ph:
Email:	ACN/ARBN:
Address for serving of Notices: (if different from the above)	
Indicate if the applicant is a lessee or licensee of Crown land which this appl	olication applies to
Contact Person:	Ph:

Lessee Responsible for Building Works

Indicate if a lessee of the building, of which parts are leased by different persons,	Γ
is responsible for the alterations to a part of the building leased by the lessee	

Ownership Details (only if agent of owner listed above)

Name:	
Postal Address:	Postcode:
Contact Person:	Ph:
Email:	ACN/ARBN:

Property Details

Number		Street / Road		City / Suburb / Town			Postcode	
Lot/s	LP/PS		Volume	Folio	Crown Allotment	Section	Parish	County
Municipality			Allotment Area (for new dwelling)			m ²		
Land owned by the crown or a public authority Yes No								
Owner Builder I intend to carry out the work as an owner builder Yes No (Ple Owner builder certificate of consent number (if applicable).					(Please provide	e builder details b	pelow)	

Social housing

Does any of the building work include the construction of social housing as referred to in regulation 281B of the Building Regulations 2018? Yes No

[Indicate Yes if the building work, which is the subject of this application, includes the construction of social housing or if other building work, which is the subject of a related staged building permit, includes the construction of social housing.]



Emergency recovery

Does any of the building work include the construction of a dwelling that was destroyed or damaged in an emergency referred to in regulation 166J(b) of the Building Regulations 2018? Yes No

[Indicate Yes if the building work, which is the subject of this application, includes the construction or repair of a dwelling within the same municipal district as the destroyed or damaged residential dwelling.]

Nature of Building Work

What type of structure are you building / Proposed Use of Building:

Tick if applicable or give other description

Construction of a new building	Demolition of a building				
Alterations to an existing building	Removal of a building				
Extension to an existing building	Re-erection of a building				
Construction of a swimming pool / Spa	Change of use of existing building				
Construction of a swimming pool / Spa barrier	Other				

Note

Under the Building Act 1993 swimming pool is defined to include a spa

Builders Details (if known)

Name		Registration No.			
Company Name		Company Registration No.			
Address		Phone No.			
Email Address		ACN/ARBN			

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

Name	Phone No.	
Postal Address	Postcode	

Building Practitioners and Architect engaged to prepare documents in the building work.

Practitioners Name	Category & Class	Registration No.

Cost of Building Work

Is there a contract for the building work?

Yes	Contract Price (Please supply a copy of the contract / quote)		\$
No	Estimated cost of the works (including the cost of	Erection	\$
	labour and materials) and attach details of the method of estimation.	Concrete Slab / Footings	\$
		Structural Kit / Project	\$



Does the building work relate to more than one class of building, including a class of building referred to in section 205G(2A) of the Building Act 1993 and a class 1, 9 or 10 building?	Yes	
If yes, provide the cost of the building work that relates to the class or classes referred to in section	Cost of building work relating to a class 2, 3, 4, 5, 6, 7 or 8 building	\$
205G(2A) of the Building Act 1993 and the cost of the building work that relates to a class 1, 9 or 10 building:	Cost of building work relating to a class 1, 9 or 10 building	\$

Stage Building Permits Only – Stage of Building Work (The application form is required to be completed for each stage)				
Is this permit to be issued over stages:	Yes	No		
If yes please tick what stage this application is fe	or and supply the	cost of works for the project and stage:		
Slab Stage Lock Up		Completion		
Cost of Works for the entire project: \$	Cost	t of Works for this stage only: \$		

I can confirm that a building permit application for the proposed building work has not been lodged with another building surveyor.

Signature of Owner or AgentDateDate



Appointment of Building Surveyor by the Owner:

Please complete and signed the statement below so that we can issue your Building Permit, carry out our inspections and issue an Occupancy Permit or Certificate of Final for your building project. We will also provide Council with a copy of the Building Permit, approved plans and required documents for their records.

I, ______ (Name of owner), appoint B4U Build Building Consultants as the relevant building surveyor pursuant to section 78 of the Building Act 1993 for the purpose of issuing a building permit, carry out building inspections and issuing an Occupancy Permit or Certificate of Final Inspection for the proposed building work at the above site address.

Signature of Owner: _____ Date: _____

Authorisation to Act as an Agent of the Owner:

Please complete and sign the statement below which will allow your nominated agent to submit an application for a Building Permit on your behalf. We will provide your agent with a copy of the Building Permit to allow you to begin construction and a copy of the Occupancy Permit or Certificate of Final upon completion of the building work.

l,	(Name of owner),
authorise	(Name of builder / agent)
to act as my agent pursuant to section 240 of the Building A	Act 1993 for the purpose of submitting an applicatio

to act as my agent pursuant to section 240 of the Building Act 1993 for the purpose of submitting an application for a Building Permit and/or Occupancy Permit to the relevant building surveyor for the proposed building work at the above site address.

Signature of Owner: _____

_____ Date: ____

The client or applicant shall appoint Stephen Bond BS-L 36361 of B4U Build Building Consultants as the RBS for the building work upon signing this document. For all conditions of the appointment, please refer to our terms of engagement on our website.