

NicholsonWright

ApplicationForm

Building Act 1993 Building Interim Regulations 2017
 Regulation 301 (Schedule 2) Form 1

To (BUILDING SURVEYOR)

Mr. Jim Tsaganas Mr. Pat Richardson	Registration Number	BS-U 1329 BS-L 38408	Address	57 Cochranes Rd Moorabbin VIC 3189
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PROPERTY DETAILS

Number	Street Road	City / Suburb	Postcode
Municipal District	LP/ PS	Allotment Area (m ²)	New Building Floor Area (m ²)
Parish of	Vol	Folio	Crown Allotment

APPLICANT (OWNER / AGENT OF OWNER)

Name	Telephone
Postal Address	Facsimile
Contact Person	Mobile
Address For Serving And Giving Documents	Email

OWNER (ONLY IF AGENT OF OWNER IS LISTED ABOVE)

Name	Telephone
Postal Address	Facsimile
Contact Person	Mobile

NATURE OF BUILDING WORK (TICK IF APPLICABLE OR GIVE OTHER DESCRIPTION)

- | | |
|--|--|
| CONSTRUCTION OF A NEW BUILDING <input type="checkbox"/> | ALTERATIONS TO AN EXISTING BUILDING <input type="checkbox"/> |
| REMOVAL OF A BUILDING <input type="checkbox"/> | CHANGE OF USE OF AN EXISTING BUILDING <input type="checkbox"/> |
| EXTENSION TO AN EXISTING BUILDING <input type="checkbox"/> | RE – ERECTION OF A BUILDING <input type="checkbox"/> |
| DEMOLITION OF A BUILDING <input type="checkbox"/> | OTHER _____ <input type="checkbox"/> |

PROPOSED USE OF BUILDING

--

OWNER BUILDER (CIRCLE)

YES / NO

BUILDER (IF OWNER BUILDER SPECIFY)

Name	Telephone
Postal Address	Facsimile
Contact Person	Mobile
Project Supervisor	Email

PLEASE TURN OVER TO COMPLETE THE REMAINDER OF THIS DOCUMENT

