

# APPLICATION FOR A BUILDING PERMIT V1-2022

## Form 1

Regulation 24 | Building Act 1993 | Building Regulations 2018



**\*Required information**

**To: (Building Surveyor)**

**CENTRAL GOLDFIELDS SHIRE COUNCIL**

**From:**

\*Owner / \*Agent of Owner

\*ACN / \*ARBN

Postal Address of Applicant

Postcode

Email

### Address for serving or giving of documents:

Postal Address:

Postcode:

Indicate if the applicant is a lessee or licensee of Crown Land to which this application applies:

Yes ☐

No ☐

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: Yes ☐ Not Applicable ☐

### Ownership details (if applicant is agent of owner):

Full Name of  
Owner(s)

\*ACN / \*ARBN

Postal Address

Postcode

Contact Person

Telephone

Email

### Property details:

Street Address

Postcode

Lot/s

LP/PS

Volume

Folio

Crown Allotment \_\_\_\_\_ Section No \_\_\_\_\_

Parish \_\_\_\_\_ County \_\_\_\_\_

Municipal District: **CGSC** Allotment area (for new dwellings only m<sup>2</sup>) \_\_\_\_\_

Land owned by the Crown or a public authority ☐

**Builder:**

Name \_\_\_\_\_

ACN/ABN \_\_\_\_\_

Building Practitioner Registration No. \_\_\_\_\_

Postal Address \_\_\_\_\_ Postcode \_\_\_\_\_

*Note: 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 practitioner or architect engaged to prepare documents for this permit:**

*List any building practitioner or architect engaged to prepare documents forming part of the application for this permit. If you have additional consultants, provide a separate list with this application.*

Name	Category / Class	Registration Number

**Nature of Building Work:**

- |  |  |
|--|--|
| <input type="checkbox"/> 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 barrier |
| <input type="checkbox"/> Construction of a swimming pool       |  |
| <input type="checkbox"/> Other (give brief description): _____ |  |

## Proposed Use of Building:

### Note

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

### 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 ☐

*Please 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 ☐

*Please 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*

### \*Owner builder:

I intend to carry out the work as an owner builder. Yes ☐ No ☐

Owner builder certificate of consent number (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 (on separate attachment). \$ \_\_\_\_\_

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 ☐ No ☐

If **yes**, provide the cost of the building work that relates to the class or classes referred to in section 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 2, 3, 4, 5, 6, 7 or 8 building \$ \_\_\_\_\_

Cost of building work relating to a class 1, 9 or 10 building \$ \_\_\_\_\_

**Stage of building work (if application is to permit a stage of the work):**

Extent of stage \_\_\_\_\_

Cost of work for this stage \$ \_\_\_\_\_

Cost of work for the whole of the building work \$ \_\_\_\_\_

**\*Signature:**

Signature of Applicant \_\_\_\_\_

Date \_\_\_\_\_

**Submit completed application and accompanying documentation to:**

Building Section  
Central Goldfields Shire Council  
Municipal Offices, 12-22 Nolan St, Maryborough  
PO Box 194 Maryborough Victoria 3465  
Phone: 03 5461 0610 Fax: 03 5461 0666  
[mail@cgoldshire.vic.gov.au](mailto:mail@cgoldshire.vic.gov.au)