

► BUILDING PERMIT APPLICATION

Application No:

Office Use Only		
Fees (Payment required on submission of application)		
Building Inspections (incl GST)	\$	10-1108-1001-41138
Building Permit Fee	\$	10-11108-1001-41137
BC Levy	\$	10-9000-9000-20094
Lodgement Fee	\$	10-1108-1001-40017
Total	\$	
Received By:		Receipt No:

FORM 1

Regulation 24

**Building Act 1993**  
Building Regulations 2018  
**APPLICATION FOR A BUILDING PERMIT**

To: Municipal Building Surveyor, PO Box 21, Daylesford, 3460

\* Delete if inapplicable  
† Tick if applicable

**From**

\*Owner/\*Agent of owner:

\*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 †  
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 †

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

Name of owner(s) [insert full name(s)]

\*ACN/\*ARBN

Postal address

Postcode

Contact person

Telephone

Email

**Property details**

Number Street/Road City/Suburb/Town Postcode

Lot/s LP/PS Volume Folio

Crown allotment Section Parish County

Municipal district: Shire of Hepburn Allotment area (for new dwellings only) m<sup>2</sup>

Land owned by the Crown or a public authority †

## ▶ Building Permit Application

**Builder** (if known)

Name Telephone

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Postal address Postcode

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**Building practitioners and/or architect**

(a) to be engaged in the building work  
 Name Category/class Registration no.

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Name Category/class Registration no.

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*If a registered domestic builder carrying out domestic building work, attach details of the required insurance.*

(b) who were engaged to prepare documents forming part of the application for this permit  
 Name Category/class Registration no.

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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"/> | Construction of swimming pool or spa         | <input type="checkbox"/> |
| Demolition of a building          | <input type="checkbox"/> | Removal of a building                 | <input type="checkbox"/> | Construction of swimming pool or spa barrier | <input type="checkbox"/> |
| Extension to an existing building | <input type="checkbox"/> | Change of use of an existing building | <input type="checkbox"/> | Other [give description]                     | <input type="checkbox"/> |
| Re-erection of a building         | <input type="checkbox"/> |                                       |                          |  |                          |

Proposed use of building

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**\*Owner-builder**

I intend to carry out the work as an owner-builder. [Yes/No]

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**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 \$

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**Stage of building work**

If application is to permit a stage of the work—

Extent of stage

Cost of work for this stage \$

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**Signature**

Signature of applicant Date

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*Building Components*

Walls – Brick Veneer / Timber / Double Brick / Steel / Other

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Frame – Timber / Steel / Double Brick / Other

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Floor – Concrete / Timber / Other

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Roof – Tile / Steel / Other

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Relevant Planning Permit Number\* Date Of Issue\*