#### **Form 1**

**AR No:……………………..**

**Receipt No:………………..**

#### Building Act 1993

Building Regulations 2018

Regulation 24

**To: The Building Surveyor**

|  |
| --- |
| **property details:**  **LOT/S**...............................**NUMBER**......................**Street/Road**......................................................................................  **CITY/SUBURB/TOWN**..................................................................................................................**POSTCODE**.....................  LP/PS ………………………….Volume ..................................................... Folio.............................  Crown allotment.......................Section.....................Parish......................................County ...................................................  Municipal District.................................................Allotment Area .....................m2 **+**Land owned by the Crown or a public  Authority**. + tick if applicable .... [ ]** |

**APPLICANT:** Owner/Agent of Owner\* **\*Delete as applicable**

Name: ......................................................................................................................................................................................

ACN/ABN……………………………………………………………………………………………………………………………….

Postal Address..........................................................................................................................Post Code...............................

**Address for serving or giving documents**............................................................................................................................

..................................................................................................................................................Post Code................................

Contact Person: ........................................................................................................................Tel: .........................................

Email…………………………….............................................................................................Mobile:….......……………….........

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

Tick if applicable [ ] Contact person:........................................................................Tel:......................................

**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: (only if agent of owner listed above)**

Owner:

ACN/ABN……………………………………………………………………………………………………………………………….

Postal Address:.........................................................................................................................Post Code..............................

Address....................................................................................................................................Post Code.

Contact Person:........................................................................................................................Tel….......................................

Email……………………………………………………………………………………………………………………………………….

**BUILDER: (if known)**

ACN/ABN………………………………………………Building Practitioner Registration No:………………………………………

Postal Address:.........................................................................................................................Post Code...............................

Address:....................................................................................................................................Post Code...............................

Contact Person.........................................................................................................................Tel:..........................................

Email.........................................................................................................................................Mobile,………………................

*[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:

Postal Address:.........................................................................................................................Post Code...............................

Tel….........................................Email…………………………………………………………………………………………………………

**INSURANCE: Issuer/provider of Domestic Building Work Insurance...............................................................................**

**BUILDING PRACTITIONERS OR ARCHITECT ENGAGED TO PREPARE DOCUMENTS FOT THIS PERMIT:**

Name......................................................................Category/Class...................................Registration No............................

Name......................................................................Category/Class...................................Registration No............................

Name......................................................................Category/Class...................................Registration No............................

##### NATURE OF BUILDING WORK\*

Construction of a new building [ ] Other [ ]

Demolition of a building [ ] Alterations to an existing building [ ]

Extension of an existing building [ ] Removal of a building [ ]

Re-erection of a building [ ] Change of use of an existing building [ ]

Existing [ ] Construction of swimming pool or spa [ ]

Construction of swimming pool or spa barrier [ ]

\* Tick if applicable or give another description

**Proposed use of building** **......................................................................................................**

**Owner Builder** (if applicable)

I intend to carry out the work as an owner builder (Yes/No)

**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 permit is to permit a stage of the work

Extent of stage **.........................................................**

**Cost of work for this stage $........................................................**

Living area of new works m² Floor type

Total area of new works m² Ext Wall type

Existing dwellings Roof type

New dwellings Frame type

Dwellings demolished No of storeys

……………………………………………………………………

* Has another Building Surveyor been engaged for this building work Yes [ ] No [ ]
* The structure is already constructed Yes [ ] No [ ]
* Is the property serviced by sewerage Yes [ ] No [ ]
* Does the property require the installation/alteration of a septic tank system Yes [ ] No [ ]

Town Planning Permit No: ………………………. Date of Issue: …………………………..

Building Permit Fees being paid by: Applicant  Owner  Builder

|  |  |
| --- | --- |
| **SIGNATURE**    **X.....................................................**    **SIGNATURE: (Owner/Agent)**  **Date:........../......../............** | We Request Wyndham Building Permits **1. To obtain Property Information:**  **Yes**  **No**   1. **To obtain Stormwater Information**   **Yes**  **No** |

**THE BUILDING PERMIT & THE RELEVANT BUILDING SURVEYOR (THE RBS)**

The building permit issued will be an assessment of the drawings and documentation for compliance with the Building Act and Regulations and not the serviceability, quality or functionality of the work. This appointment is limited to ensuring to the work carried out complies with the Act and Regulations that are applicable at this time. The RBS is responsible for the carrying out of inspections that will be listed on the Building Permit. The client is responsible to ensure that the RBS is given adequate notification for inspection and shall ensure that works do not continue beyond the notification stage until the inspection is approved.

**PURPOSE OF INSPECTION**

Inspections carried out will be the minimum required to ensure compliance with the Building Permit and not supervision of all the work. It is the responsibility of the *builder* to construct the building fully in accordance with the approved permit documents. Variations must be approved by the RBS prior to construction and those variations that require further document survey and assessment and/or approval will incur an additional fee. **Should any additional inspections be carried out other than the number allocated on the Building Permit additional fees will be charged at $150.00 for each additional inspection.**  Any additional fee required will be payable at the discretion of the RBS and must be paid before a final inspection certificate or occupancy permit is requested.

**BUILDING NOTICES & ORDERS**

Building Notices and Orders are formal documents prescribed in the Regulations when breaches and non compliance are identified for the purpose of securing compliance with the permit documents and other relevant provisions of the Regulations.

Notices and Orders are required to be served as a matter of course for significant areas of non- compliance or where safety is or may be compromised. In the case of routine rectification works a direction will normally be sent to the owner and/or builder as applicable and in the event of non- response within an appropriate time – 7,14 or 30 days a Building Notice will be served and further fees will be payable as per Schedule 2 of the Building Act 1993.

Note: The use of a building may also be subject to additional requirements under other legislation such as

the Liquor Control Reform Act 1998 and the Dangerous Goods Act 1985.

Note: If an owner builder, there are restrictions on the sale of a building under section 137B of the Building Act 1993.

Section 137B prohibits an owner builder from selling a building on which domestic building work has been carried

out within 6.5 years from the completion of the relevant building work unless they have satisfied certain requirements

including obtaining compulsory insurance. The Victorian Building Authority maintains a current list of domestic

building insurance providers.

**Privacy Notification:**

**The personal information requested on this form is being collected by Council in accordance with the Building Act 1993. Your information will be stored in Council’s Customer Database and used to identify you when communicating with Council and for the delivery of services and information. For further information on how your personal information is handled, visit Council’s Privacy Policy at** [**https://www.wyndham.vic.gov.au/privacy-policy**](https://www.wyndham.vic.gov.au/privacy-policy)

**OFFICE USE ONLY - FEES**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **DESCRIPTION** | **$** | **Receipt No** | **Date** |  | **Mandatory Inspections** | |  |
| **BUILDING FEE**  **(incl. GST)** |  |  |  |  | **PIERS** |  |  |
| **STATE GOV’T LEVY \*\*** |  |  |  |  | **BLINDING** |  |  |
| **PROPERTY INFO** |  |  |  |  | **PRE-SLAB** |  |  |
| **SWD INFO** |  |  |  |  | **SLAB STEEL** |  |  |
| **LODGEMENT FEE** |  |  |  |  | **FOUNDATIONS** |  |  |
| **EXISTING STRUCTURE**  **(inc GST)** |  |  |  |  | **PAD FOOTINGS** |  |  |
| **TITLE SEARCH**  **(inc GST)** |  |  |  |  | **SUBFLOOR** |  |  |
| **SITE SIGNAGE**  **(inc GST)** |  |  |  |  | **FRL WALL FRAME** |  |  |
| **ADDITIONAL FEE**  **(inc GST)** |  |  |  |  | **FRAME** |  |  |
|  |  |  |  |  | **FINAL** |  |  |
|  |  |  |  |  | **CONTRACT INSPECTOR:** |  |  |
| **TOTAL** |  |  |  |  | **Name:**  **Contact:** |  |  |
|  |  |  |  |  |  |  |  |

\*\* State Government Levy will be forwarded to Victorian Building Authority on your behalf

Termite Certificate required: Yes  No

**Description ………………………….. BCA Class ………………………………….**

**…………………………. ………………………………….**