APPLICATION



Application for demolition permit

Building Act 2011, section 15, 16 Building Regulations 2012, regulation 4, 16

PERMIT AUTHORITY USE ONLY Reference number

Permit authority

1. Property this application relates to

Property street address (provide lot number where street number is not known)	Unit no	Street no	Level	Lot no	
	Street name		Street type	Street suffix	
	Suburb		State	Postcode	
Certificate of title (if known)	Volume		Folio		
Manual and a straight of					
Year of construction of building to be demolish					
Local government area from permit authority)	a (if different				

2. Details of demolition work

Project name (if any)						
Type of demolition	Full demolition		Partial demo	olition	Relocation of a building from this site to another	
Description of the demolition work		·				
Building Code of Australia (BCA)	Main BCA class					
class of the building(s) to be demolished	Secondary BCA class (for multi- purpose buildings)			Third BCA class (for multi-purpose buildings)		
Occupancy permit number of the building(s) (if known)		-	Number of relocated F site to anot	ROM this		
Floor area to be demolished (m ²)	Site (lo		Site (lot) ar	lot) area (m ²)		
Number of dwellings to be demolished			Estimated demolition (including (work	\$	
Number of storeys of the highest building (above ground)				basement the building und)		

3. Owner details

Owner's name						
Street address (provide lot number	Unit no Street no			Level		Lot no
where street number is not known)	Street name			Street type		Street suffix
	Suburb		State		Postcode	Country (if not Australia)
OR						
PO Box address	PO Box no					
	Suburb		State		Postcode	Country (if not Australia)
Email address						
Phone/fax	Phone no			Fax		
Owner's signature*						Date

*If you are authorised to sign on behalf of the owner, please provide your written legal authorisation with your application.

4. Demolition contractor details

Demolition contractor's name						
Street address (provide lot number	Unit no	Street no		Level		Lot no
where street number is not known)	Street name			Street type		Street suffix
	Suburb		State		Postcode	Country (if not Australia)
OR						
PO Box address	PO Box no					
	Suburb		State		Postcode	Country (if not Australia)
Email address						
Phone/fax	Phone no			Fax		
Demolition licence number	Issued under the Occupational Safety and Health Regulations 1996 (if applicable)					

Where there are multiple owners, please attach a list with the names and signatures of each owner. If each of those owners requires a copy of the demolition permit, please also provide forwarding details for each owner.

						BA5			
Demolition contractor's	Name (print)								
signature	Signature					Date			
5. Applicant details									
Who is the applicant? (Tick one box)	Owner Demolition contractor Other								
	If 'Other' was selected above, complete the following details:								
Applicant's name									
Street address (provide lot number where street number is not known)	Unit no Street no			Level		Lot no			
	Street name Stre			Stre	eet type	Street suffix			
	Suburb	State			Postcode	Country (if not Australia)			
OR									
PO Box address	PO Box no								
	Suburb		State	Postcode		Country (if not Australia)			
Email address									
Phone/fax	Phone no				Fax				

6. Statement by applicant

I understand that a demolition permit cannot be granted unless:

- 1. All the prescribed information is provided with this application
- 2. In accordance with section 20 of the Building Act 2011 and regulation 19 of the Building Regulations 2012:
 - all relevant prescribed authorities have been obtained and have been or are being complied with; and
 - all prescribed notifications have been given.

Provide evidence of compliance with approvals given.

3. All consents or court orders have been obtained if the demolition work may adversely affect land beyond the boundaries of the works land.

Does the proposed work adversely affect other land?
Yes No

If yes, has consent or a court order been obtained?

Attach a copy of each consent (form BA20) or court order obtained.

Applicant's signature

Name (print)	
Signature	Date