

APPLICATION FOR A DISABILITY ACCESS CERTIFICATE

Comhairle Cathrach Chorcaí Cork City Council



Building Control Section
City Hall - Anglesea Street - Cork

Application is hereby made under Part IIIB of the Building Control Regulations, 1997 to 2009 for a Disability Access Certificate in respect of the works or Building to which the accompanying plans, calculations and specifications apply.

OFFICE USE ONLY

Date received: _____
Register Ref.: _____
Entered on: _____
Entered by: _____
Fee Received: _____
Receipt No: _____

1. APPLICANT: Owner/Leaseholder (delete as appropriate)

FULL NAME: _____

ADDRESS: _____

SIGNATURE: _____

TELEPHONE NO. _____ DATE _____

Owner of works or building (if different to above) _____

FULL NAME: _____

ADDRESS: _____

2. Name and address of persons/s or firm/s to whom notifications should be forwarded
(Owner/Leaseholder or Designer/Developer/Builder)

Phone No. _____ Fax. No. _____

3. Name and address of person/s or firm/s responsible for preparation of accompanying plans, calculations and specifications.

Phone No. _____ Fax. No. _____

4. Address (or other necessary identification) of the proposed works or building to which the application relates.

5. Classification of works or building: (please tick as appropriate)

- Construction of new building YES NO
- Material alteration YES NO
- Material change of use YES NO
- Extension to a building YES NO

Brief description of building:

6. Use of proposed works or building

(a) Existing use (where a change is proposed) _____

(b) New Use _____

7. Has planning permission been applied for and granted for works or building?

(a) Date permission was granted _____

(b) Planning permission No. _____

8. In the case of

(a) Works involving the construction of a building, or a building the material use of which is being changed -

Site area _____ (sq. metres)

Number of basement storeys _____

Number of storeys above ground level _____

Height of top floor above ground level _____ (metres)

Floor area of building _____ (sq. metres)

Total area of ground floor _____ (sq. metres)

(b) Works involving an extension or the material alteration of a building:

Floor area of building extension _____ (sq. metres)

Floor area of material alteration _____ (sq. metres)

9. Amount of Fee (accompanying this application)

€ _____

This Application Form must be accompanied by a complete and certified set of drawings for the works or building.