**OFFICIAL USE:**

Date Received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Register Ref.: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Entered on: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Entered by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fee Received: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**FORM OF APPLICATION FOR A**

**DISABILTY ACCESS CERTIFICATE**

**Building Control Acts 1990 - 2014**

**Application for a   
Disability Access Certificate**

**Building Control Authority –   
Sligo County Council**



**Application is hereby made under Part IIIB of the Building Control Regulations 1997 to 2018 for a Disability Access Certificate in respect of proposed works or building to which the accompanying plans, calculations and specifications apply:**

**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 & address of person(s) or firm(s) to whom notifications should be forwarded (owner/leaseholder or Designer/Developer/Builder):**

**3. Name & address of person(s) or firm(s) responsible for preparation of accompanying plans, calculations and specifications:**

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

**5. Classification of works or building:**

**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 buildings?**

**(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 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(metres)**

**Height of storeys above ground level \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(metres)**

**Height of top floor above ground level \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**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 enclosed €\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.**

**This application form must be accompanied by a complete and certified set of drawings for the works or building**