

Applicant Details

Applicant Name:

## Report & Consent Application Erect Precautions Over a Street Alignment

Regulation 116 of the Building Regulations 2018

Compan	y Name:				
Applicant Postal Address:					
Applicant Phone:			Applicant Em	ail:	
Owner D	)etails				
Registered Owner Name/s:					
		,,, σ.			
Property Details					
Street Number				Lot Number	•
Street/R	load Name:			Locality:	
LP/PS:			Volume:	Folio:	
Relevant	t Building Survey	vor Details			
Building Surveyor Name:					
Details of proposed Protection Over the Street Alignment					
Details o	of proposed Prot	ection Over the Stre	eet Alignment		
Descript	ion of Project:				
Descript					
	g Structures:				
Hoarding	g Dates:	Commencement:		Completion:	
Documentation Required					
Have you attached the following?					
Completed application form and fee					
Title (Including title plan)					
Working drawings reviewed by Relevant Building Surveyor					
Applicant Signature: Date:					
Application Fee:					
This application fee is payable upon submission and is non-refundable \$334.50					
How to submit this form					
How to	Sale Service Cer		Varram	Service Centre	
In	18 Desailly Street, Sale		156 Gra	156 Grant Street, Yarram	
Person	Monday-Friday - 8:30am – 5:00pm Telephone 1300 366 244			Monday, Tuesday, Thursday, Friday 10:00am – 2:00pm Telephone (03) 5182 5100	
By Post	PO Box 506, Sale		By Emai		ellington.vic.gov.au
OFFICE USE ONLY  Date: Officer:			La contraction de la contracti	ceived: \$	(Short Key 268)
Date: Officer: Receipt No.:					
The personal information requested on this form is being collected by Council for a Building Services application. The information will be used solely					