

1 Application for a Reversion

Please confirm date the work the works was commenced.....

2 Address of the Work

Postcode:

3 Full Description of Work e.g. Erection of single storey extension:

Use of Building e.g. Dwelling, office, shop....

State Previous Use: State Current Use:.....

Is the building subject to the requirements of the RRO? Yes [] No []

4 Applicant Details please give full name of owner of the property (BLOCK LETTERS)

Name:

Address:

Post Code: Tel: Email:

5 Agents Details (if applicable) Name:

Address:

Post Code: Tel: Email:

6 Builders Details (person carrying out the work)

Name:

Address:

Post Code: Tel: Email:

7 Charges:

The fee for our building control service will be individually determined for each application. Please contact Building Control for further details. Your application cannot be processed until payment is received.

8 In support of your application please also provide:-

- Any plans/ drawings or specifications
- Structural engineers design and associated structural calculations
- Photographs of the works in progress
- Water Authority consultation where a build over agreement was necessary
- Fire Service consultation where works were subject to The Regulatory Reform (Fire Safety) Order
- Site Inspection records of the works carried out.

9 Reversion Application

Submitted in accordance with Regulation 18 and is accompanied by the appropriate fee

Name: (print)..... Signature: Date: