

**FORM 1  
APPLICATION FOR A BUILDING PERMIT**

Building Act 1993  
Building Regulations 2018  
Regulation 24



**To** Relevant Building Surveyor - Vic Permits Building Surveyors

**From (Serving of Documents)**

Owner/Agent of Owner \_\_\_\_\_  
ACN/ARBN (if applicable) \_\_\_\_\_  
Postal Address and Post Code \_\_\_\_\_  
Applicant Lessee/Licensee of Crown Land **YES  / NO**  – If Yes, advise: \_\_\_\_\_  
Contact Person \_\_\_\_\_ Telephone \_\_\_\_\_  
Email Address \_\_\_\_\_

**Lessee Responsible for Building Work**

Indicate if a lessee of the building, of which parts are leased by different persons, is responsible for the alterations to a part of the building leased by the lessee **YES  / NO**

**Ownership Details** (if applicant is agent of owner)

Name of All Owner(s) \_\_\_\_\_  
ACN/ARBN (if applicable) \_\_\_\_\_  
Postal Address and Post Code \_\_\_\_\_  
Contact Person \_\_\_\_\_ Telephone \_\_\_\_\_  
Email Address \_\_\_\_\_

**Property/Project Details** (include title details as and if applicable)

Project Description \_\_\_\_\_  
Address and Post Code \_\_\_\_\_  
Lot/s \_\_\_\_\_ LP/PS \_\_\_\_\_ Volume \_\_\_\_\_ Folio \_\_\_\_\_  
Crown Allotment \_\_\_\_\_ Section \_\_\_\_\_ Parish \_\_\_\_\_ County \_\_\_\_\_  
Municipal District (Council) \_\_\_\_\_

Allotment Area \_\_\_\_\_ m<sup>2</sup> (for new dwellings only)

Land Owned by Crown or Public Authority **YES  / NO**

**Builder**

Name (Company or Sole Trader) \_\_\_\_\_  
ACN/ARBN (if applicable) \_\_\_\_\_ Building Practitioner Reg No. \_\_\_\_\_  
Postal Address and Post Code \_\_\_\_\_  
Email Address \_\_\_\_\_ Telephone \_\_\_\_\_

If the builder is carrying out domestic building work under a major domestic building contract, attach an extract of the major domestic building contract showing the names of the parties to the contract in relation to the proposed building work and a copy of the certificate of insurance (if applicable).

**Natural Person for Service of Directions, Notices and Orders** (if builder is a body corporate/company)

Name (Director of Company) \_\_\_\_\_ Telephone \_\_\_\_\_  
Postal Address and Post Code \_\_\_\_\_

**Building Practitioner or Architect Engaged to Prepare Documents for this Permit**

List any building practitioner or architect engaged to prepare documents forming part of the application for this permit.

Name	Category/Class	Registration No.
_____	Draftsperson – Building Design (Architectural)	_____
_____	Architect	_____
_____	Engineer – Civil	_____
_____	Engineer – Fire Safety	_____

**Nature of Building Work**

- |                                     |                          |  |                          |
|-------------------------------------|--------------------------|--|--------------------------|
| Construction of a new building      | <input type="checkbox"/> | Change of use of an existing building        | <input type="checkbox"/> |
| Alterations to an existing building | <input type="checkbox"/> | Re-Erection of a building                    | <input type="checkbox"/> |
| Demolition of a building            | <input type="checkbox"/> | Construction of swimming pool or spa         | <input type="checkbox"/> |
| Removal of a building               | <input type="checkbox"/> | Construction of swimming pool or spa barrier | <input type="checkbox"/> |
| Extension to an existing building   | <input type="checkbox"/> | Construction of a small second dwelling      | <input type="checkbox"/> |
| Other (provide description)         | <input type="checkbox"/> |  |                          |

Proposed use of building \_\_\_\_\_

**Social Housing**

Does any of the building work include construction of social housing as referred to in Regulation 281B? YES  / NO

Indicate **Yes** if the building work, which is the subject of this application, includes the construction of social housing or if other building work, which is the subject of a related staged building permit, includes the construction of social housing.

**Emergency Recovery**

Does any of the building work include the construction of a dwelling that was destroyed or damaged in an emergency referred to in regulation 166J(b) of the Building Regulations 2018? YES  / NO

Indicate **Yes** if the building work, which is the subject of this application, includes the construction or repair of a dwelling within the same municipal district as the destroyed or damaged residential dwelling.

**Has another Building Surveyor been appointed to this project?** YES  / NO

**Owner Builder**

I intend to carry out the work as an owner builder YES  / NO

Owner builder certificate of consent number (if applicable) OB \_\_\_\_\_

**Cost of Building Work**

Is there a contract for the building work? YES  / NO

If **yes**, state contract price (including GST) \$ \_\_\_\_\_

If **no**, state estimated cost (labour/materials) and attach details of the method of estimation \$ \_\_\_\_\_

Does the building work relate to more than one class of building, including a class of building referred to in section 205G(2A) of the Building Act 1993 and a class 1, 9 or 10 building? YES  / NO

If **yes**, provide the cost of the building work that relates to the class or classes referred to in section 205G(2A) of the Building Act 1993 and the cost of the building work that relates to a class 1, 9 or 10 building:

Cost of building work relating to a class 2-8 building \$ \_\_\_\_\_

Cost of building work relating to a class 1, 9 or 10 building (e.g. residential dwelling and garage) \$ \_\_\_\_\_

**Stage of Building Work** (if application is to permit a stage of the building work)

Extent of stage \_\_\_\_\_

Cost of work for this stage (including GST) \$ \_\_\_\_\_

Cost of work for the whole of the building work (including GST) \$ \_\_\_\_\_

**Signature**

Signature of Applicant \_\_\_\_\_ Date: \_\_\_\_\_

**COMPLETE DOCUMENT IN FULL. INCOMPLETE FORMS WILL BE RETURNED**