

Telephone 03 6269 0000 Fax 03 6269 0014

ABN 12 690 767 695 www sorell tas gov au

APPLICATIO	N FOR BUILDING CERTIFICATE	Regulation 83
To:		General Manager  Address Suburb/postcode
Applicants deta	ails:	
Name: Address:	Email address:	Contact person:  Phone No:  Fax No:
(X which applicable)  Persons other than the of the subject building are to the owner or purchaser of the owner or purchaser or purchaser or the owner or the own	to be expressly authorised by	authorised person:
Details of build	ing(s):	
Address:		Lot No:  Certificate of title No:
(X applicable box.) all buildings	on site: a particular building on site:	part of a building:
Description:		(description of building or particular building on site)
Application det	ails:	
This application is made under regulation 83 of the <i>Building Regulations 2016</i> , and in accordance with any Determination made by the Director in relation to building certificates.		
Applicant:	Name: [print]	Signed: Date:
Applicant: Signature of owner or person	purchaser if applicant is authorised	