



# BUILDING CONTROL AUTHORITY COMHAIRLE CHONTAE LUIMNIGH

**LIIMERICK COUNTY COUNCIL**  
**COUNTY HALL**  
**DOORADOYLE**  
**LIMERICK**  
**Tel: 061 4986378 Fax 061 496014**  
**Email: [buildingstandards@limerickcoco.ie](mailto:buildingstandards@limerickcoco.ie)**

## Office use only

Date received: \_\_\_\_\_  
Register Ref: \_\_\_\_\_  
Entered on: \_\_\_\_\_  
Entered By: \_\_\_\_\_  
Fee Received: \_\_\_\_\_

### **Building Control Acts 1990 & 2007** **Application for a Disability Access Certificate**

Application is hereby made under Part IIIB of the Building Control Regulations 1997 to 2009 for a Disability Access Certificate in respect of the works or building to which the accompanying plans, calculations and specifications apply.. Fee €800.00 applies

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1.APPLICANT: Owner / Leaseholder (delete as appropriate)

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_ Tel: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_

Owner of works or building (if different to above):

Full Name: \_\_\_\_\_

Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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2. Name and address of person/s or firm/s to whom notifications should be forwarded  
(Owner/Leaseholder or Designer/Developer/Builder):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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3. Name and address of person/s or firm/s responsible for preparation of  
accompanying plans, calculations and specifications:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

\_\_\_\_\_  
\_\_\_\_\_

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

Construction of new building	<u>YES</u>	<u>NO</u>
Material alteration	<u>YES</u>	<u>NO</u>
Material change of use	<u>YES</u>	<u>NO</u>
Extension to a building	<u>YES</u>	<u>NO</u>

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 building?:**

(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: \_\_\_\_\_

Number of storeys above ground level: \_\_\_\_\_

Height of top floor above ground level \_\_\_\_\_ (metres)

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 (accompanying this application) € \_\_\_\_\_**

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