

Making an Application under the Building Act 2011

CHECK LIST (for CERTIFIED Applications)

The following aspects must be present for a Certified Application to be valid

Applicant Name: _____
Address to Which This Application Applies: _____ _____
Application Number: _____ Date of Application: _____

Requirements under the Act		Compliance Checklist				
NO.	Requirement	Complies (Please tick)	Does not comply (Please tick)	Compliance Officer		Date
				Name	Signature	
1	Application made in approved manner & form	<input type="checkbox"/>	<input type="checkbox"/>			
2	Name & signature of each owner of the land present	<input type="checkbox"/>	<input type="checkbox"/>			
3	Name & signature of proposed builder / demolition contractor present	<input type="checkbox"/>	<input type="checkbox"/>			
4	Prescribed information about building or incidental structure or persons listed in (2) or (3) (as above) present	<input type="checkbox"/>	<input type="checkbox"/>			
5	Certificate of Design Compliance (signed by a building surveyor, and compliant with section 19) attached	<input type="checkbox"/>	<input type="checkbox"/>			
6	Plans and specifications (as specified in the certificate of design compliance) attached	<input type="checkbox"/>	<input type="checkbox"/>			
7	Copy of each technical certificate signed by a specialist (relied on by the building surveyor to sign a certificate of design compliance) attached	<input type="checkbox"/>	<input type="checkbox"/>			
8	Each prescribed technical certificate is attached	<input type="checkbox"/>	<input type="checkbox"/>			
9	Evidence that the applicable provisions of the <i>Home Building Contracts Act 1991</i> (requiring insurance or corresponding cover) have been satisfied	<input type="checkbox"/>	<input type="checkbox"/>			
10	Evidence that the applicable provisions of the <i>Building Services (Complaint Resolution and Administration) Act 2010 Part 7 Division 2</i> (requiring payment of a building services levy) have been satisfied	<input type="checkbox"/>	<input type="checkbox"/>			
11	Prescribed fee paid (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>			
12	Each other prescribed thing	<input type="checkbox"/>	<input type="checkbox"/>			
13	Regulation 16(1)(a) Address of the property on which the building or incidental structure is, or is to be located	<input type="checkbox"/>	<input type="checkbox"/>			

14	Regulation 16(1)(b) If the application is for a BUILDING PERMIT the intended use of the building or incidental structure	<input type="checkbox"/>	<input type="checkbox"/>			
15	Regulation 16(2) in relation to person proposing to be named as the builder or demolition contractor on the permit (a) postal address of the person (b) telephone number or other contact details of the person FOR BUILDING PERMITS ONLY: (c) registration number of the person as a building service contractor under the Building Services (Registration) Act 2011 OR (d) the number of the owner-builder approval given under the Building Services (Registration) Act 2011	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			
16	Regulation 16(3)(a) If other land will be adversely affected or the building will encroach, then evidence of the relevant consents or Court Orders have been obtained under Part 6, Division 3 of the Act	<input type="checkbox"/>	<input type="checkbox"/>			
17	Regulation 16(3)(b) all the approvals required under other written laws prescribed in regulation 18(2) (see above)	<input type="checkbox"/>	<input type="checkbox"/>			
18	Regulation 16(3)(c) if the application is of a class 1 or class 10 building or incidental structure details of each alternative solution proposed	<input type="checkbox"/>	<input type="checkbox"/>			
19	All other prescribed requirements satisfied _____ _____ _____	<input type="checkbox"/>	<input type="checkbox"/>			