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| --- |
| For Office Use Only |
| Application Number:  |

Reversion Application

To: Chichester District Council, East Pallant House,



 1 East Pallant, Chichester, West Sussex,

 PO19 1TY

 [www.chichester.gov.uk](http://www.chichester.gov.uk/)

Telephone: 01243 534681

CHICHESTER DISTRICT COUNCIL



BUILDING ACT 1984

THE BUILDING REGULATIONS 2010

THE BUILDING (LOCAL AUTHORITY CHARGES) REGULATIONS 2010

 *This form is to be filled in by the person who intends to carry out building work or agent. If the form is unfamiliar please read the notes on the reverse side or consult the Building Control Admin Team on the number above.*

 *Please type or use block capitals.*

**1**

Applicant's Details

**BUILDING CONTROL**

Title: First Name (or initials): Surname:

Address:

 Postcode: Contact Numbers: Email:

**2**

Agent's Details (if applicable)

Title: First Name (or initials): Surname:

Address:

 Postcode: Contact Numbers: Email

**3**

Site Address:

 Post Code:

Work Carried Out:

**4**

Number of storeys:

Description of Work:

**5**

Date of Commencement of Work:

 

**6**

Use or Intended Use of Building:

 Charges: Please pay appropriate fee by Debit or Credit Card by calling our Customer Services Team on 01243 534681

**7**

Charges will be individually determined for each application, please contact Building Control.

Please note that your application cannot be processed until payment is received.

Statement

**8**

As the person who intends to carry out building work or make a material change of use I give accordance with regulation (12) (2) (a) or (12) (2) (b) as appropriate, of The Building Regulations 2010.

Name: Signature: Date:

Notes