



REGULARISATION APPLICATION

The Building Act 1984
The Building Regulations

PLAN NUMBER:

Building Control Manager, Customer Investment and Development,
South Lakeland District Council, South Lakeland House,
Lowther Street, KENDAL, Cumbria LA9 4DL

*This form should be completed by the owner or agent. PLEASE TYPE or USE BLOCK CAPITALS.
If the form is unfamiliar please contact the above office.*

1 Applicant
Name:
Address:.....
.....
.....
Postcode:..... Tel:.....

2 Agent (if applicable)
Name:
Address:.....
.....
.....
Postcode:..... Tel:.....

3 Location of Building to which work relates
.....
.....
.....
Postcode:.....

4 Description of work carried out
.....
.....
.....

5 Date work was carried out (if not known give approximate date)

6 Use
What was the previous use?
.....
What is the present use?
.....

7 Fee
Total estimate cost £..... Fee enclosed £.....
Floor areasq m

8 Services
Means of water supply:.....
Foul water drainage:.....Surface water drainage:.....

9 Statement
This notice is given in relation to the building work as described, is submitted in accordance with Regulation 21(3) and is accompanied by the appropriate fee.

The use of the building *IS / IS NOT a use designated under the Regulatory Reform (Fire Safety) Order 2005.

Signed :

* delete as appropriate