THIRD SCHEDULE Form of Application For A Disability Access Certificate Article 20D(4) **THIRD SCHEDULE**

Building Control Acts 1990 and 2007 Application for a Disability Access Certificate						
Building Control Authority:Mayo County CouncilFire Brigade, H.Q.Humbert Way,Castlebar,Co.MayoF23 V089Application is hereby made under Part IIIB of theBuilding Control Regulations 1997 to 2009 for a Disabworks or building to which the accompanying plans, ca		•				
1.	APPLICANT: Owner / Leaseholder (delete as appr FULL NAME: ADDRESS: SIGNATURE: TELEPHONE NO.: Owner of works or building (if different to above): FULL NAME: ADDRESS:	OATE:				
2.	Name and address of person/s or firm/s to who (Owner/Leaseholder or Designer/Developer/Bu					

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	n) of the propos	sed works or building to		
	which the application relates:				
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5.	Cl. : for the effective of heildings				
).	Classification of works or building:		- * 0		
	• Construction of new building	YES	NO		
	• Material alteration	YES	NO		
	• Material change of use	YES	NO		
	• Extension to a building	YES	NO		
Br	ief description of building:				
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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.			
0				
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 mate	erial alteration of a building -		
	Floor area of extension	(sq. metres)		
	Floor area of material alteration	(sq. metres)		
	9. Amount of Fee (accompanying this application) \in			
	This Application Form must be accompanied by a complete and certified set of drawings for the works or building.			

Notes for Guidance of Applicant for Completion of Application for a Disability Access Certificate

An application must clearly and fully demonstrate how the building or works comply with the requirements of Part M of the Second Schedule to the Building Regulations.

The application shall be accompanied by the completed application form, appropriate fee where applicable and such plans (including a site or layout plan) (in duplicate) and such other particulars as are necessary to:

- Identify and describe the works or building to which the application relates,
- Enable the building control authority to assess, whether the said works or building would, if constructed in accordance with the said plans, and other particulars, comply with the requirements of Part M of the Second Schedule to the Building Regulations,
- Indentify the nature and extent of the proposed use and, where appropriate, of the existing use of the building concerned.

Plans, sections, or drawings shall be required to be at a suitable scale and all text and dimensions should be of a size and colour contrast that can be easily read. Only information pertinent to the application for a Disability Access Certificate should be included.

The application fee is €800 per building, or €500 if application is made prior to commencement and coincides with an application for a Fire Safety Certificate, where relevant.