

# OCCUPANCY PERMIT

Section 100

To:  Owner /Agent  
 Address  
  Suburb/postcode

Form **13**

## Building Surveyor details:

From:  Category:   
Address:  Phone No:   
  Fax No:   
Accreditation No:  Email address:

## Builder details:

Copy to:  Category:   
Address:  Phone No:   
  Fax No:   
Accreditation No:  Email address:

## Permit Authority details:

Copy to:  Permit Number:   
Address:  Phone No:   
  Fax No:   
Council:  Email address:

## Details of building work:

Address:  Lot No:   
  Certificate of title No:   
Type of work:  (new building / alteration / addition / repair / demolition / removal / re-erection / other)  
Use of building:  (main use) Building class:

## Occupancy Permit details:

This Occupancy Permit is for the - (X box applicable)

Whole of the building work:

Part of the building work:

Refurbishment of the building:

Change of use of the building:

Details of Part of the building work: (Where applicable)

In considering the issue of an Occupancy Permit the following matters were taken into account (s95 & s96) -

Documents:

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Information:

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Required reports:

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The use or uses to which the building may be put is as follows:

Class:	Specific use of building or part of the building:	Storey:	Number of persons for which exits are provided:	Number males for which sanitary facilities are provided:	Number females for which sanitary facilities are provided:	Maximum live load kPa:
<b>Totals:</b>						

This permit is subject to the following conditions -

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This permit is subject to the attached maintenance Schedule.

*All or Part of this building was not the subject of the normal application, permit and inspection procedures under the Building Act 2000. (Delete if not applicable)*

The building permit for this building was issued on the basis of an alternative solution under the BCA.

I certify that after assessment of the application for an occupancy permit submitted to me, I am satisfied that the building or part of the building as referred to above is suitable for occupation.

Building Surveyor: *Signed:* *Date:* *Permit No.*

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