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| Building Control Acts:  Appeal Form |
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Type of appeal

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|  | **1.** | **Type of appeal**  Please tick (✓) the box which applies to what decision you want to appeal | | | |  |
|  |  |  |  |  |  |  |
|  |  |  | Fire safety certificate |  | Dispensation |  |
|  |  |  | Revised fire safety certificate |  | Disability access certificate |  |
|  |  |  | Regularisation |  | Revised disability access certificate |  |
|  |  |  | Relaxation |  |  |
|  |  |  | | | |  |

Your details

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| --- | --- | --- | --- | --- | --- |
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|  | **2.** | **Appellant’s details (person making the appeal)**  Your full details: | | |  |
|  |  | **(a)** | Name | Click or tap here to enter text. |  |
|  |  |  |  |  |  |
|  |  | **(b)** | Address | Click or tap here to enter text. |  |
|  |  |  |  |  |  |

Agent’s details

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **3.** | **Agent’s details (if applicable)**  If an agent is making your appeal, please provide their details below. If you are not using an agent, please write “Not applicable” below. | | |  |
|  |  | **(a)** | Agent’s name | Click or tap here to enter text. |  |
|  |  |  |  |  |  |
|  |  | **(b)** | Agent’s address | Click or tap here to enter text. |  |
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Postal address for letters

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|  | **4.** | During the appeal we will post information and items to you or to your agent. For this appeal, who should we write to? (Please tick ✓ one box only) | | | | | |  |
|  |  |  | | | | | |  |
|  |  | **You (the appellant) at the address in Part 2** |  |  | **The agent at the address in Part 3** |  |  |  |
|  |  |  | | | | | |  |

Details about the decision you want to appeal

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|  | **5.** | Please provide details about the building control authority decision you wish to appeal. If you want, you can include a copy of the building control authority’s decision as the appeal details. |  |
|  | **(a)** | **Building control authority**  (for example: Ballytown City Council) |  |
|  |  | Click or tap here to enter text. |  |
|  |  |  |  |
|  | **(b)** | **Building control authority register reference number** (for example: FSC18/0123) |  |
|  |  | Click or tap here to enter text. |  |
|  |  |  |  |
|  | **(c)** | **Location**  (for example: 1 Main Street, Baile Fearainn, Co Ballytown) |  |
|  |  | Click or tap here to enter text. |  |
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Appeal details

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| --- | --- | --- | --- |
|  | 6. | Please describe the grounds of your appeal. You can type or write them in the space below or you can attach them separately. |  |
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Supporting materials

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|  | **7.** | If you wish you can include supporting materials with your appeal. Supporting materials include:   * photographs, * plans, * surveys, * drawings, * digital videos or DVDs, * technical guidance, or * other supporting materials. |  |
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Fee

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|  | 8. | You **must** make sure that the correct [fee](http://www.pleanala.ie/about/Fees/index.htm) of €500 is included with your appeal. |  |
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