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|  |
| **PLUMBING WORK****Use this form for:*** **Notice of Work**
* **Application for a Certificate of Likely Compliance**
* **Application for a Plumbing Permit**
 | **Section 108 Section 156****Section 165** |
|  |

 Form **3**

|  |  |  |
| --- | --- | --- |
| To: |  | *Permit Authority* |

|  |  |  |
| --- | --- | --- |
|  |  | *Address* |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  | *Suburb/postcode* |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Application for:** | **Permit**  |  |  | **CLC** |  |  | **Notice of Work** |  |

*(X ones applicable)*

|  |  |
| --- | --- |
| Certificate of Completion  |  |

(*X to grant approval for certificate to be issued following the final inspection)*

**NOTE: Standard of Work Certificate and applicable fees must be submitted prior to Certificate of Completion being issued, in accordance with section 178 or section 115 of the *Building Act 2016***

|  |  |
| --- | --- |
| **Applicant / Owner details:** |  |

*Note: Only an owner or agent of the owner may make an application*

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| --- | --- | --- | --- |
| **Owner:** |  | Contact person: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Address: |  | Phone No: |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  |  |  | Fax No: |  |

|  |  |
| --- | --- |
| Email address: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Agent:** |  | Contact person: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Address: |  | Phone No: |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  |  |  | Fax No: |  |

|  |  |
| --- | --- |
| Email address: |  |

*Note: Agents to be authorised in writing by the owner*

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| --- | --- |
| **Details of plumbing work:** |  |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Type of work: | Permit work |  |  | Notifiable work |  |  | Planning approval granted |  |

*(X one applicable) (if applicable)*

|  |  |  |  |
| --- | --- | --- | --- |
| Address: |  | Lot No: |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  |  |  | Certificate of title No: |  |

|  |  |  |
| --- | --- | --- |
| The work: |  | *(water or sewerage reticulation / stormwater / roof plumbing / on-site waste water management system / backflow prevention device / other)* |
|  |  |  |
|  |  |
|  | Type of plumbing installation:Brand / model:  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Use of building: |  | *(main use: dwelling, shop, food business, factory)*  | Building class(es): |  |

|  |  |
| --- | --- |
| **Plumber details:** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Name: |  | Category: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Address: |  | Phone No: |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  |  |  | Fax No: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Licence No. |  | Email address: |  |

|  |  |
| --- | --- |
| **Plumbing designer details:** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Name: |  | Category: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Address: |  | Phone No: |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  |  |  | Fax No: |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Licence No. |  | Email address: |  |

|  |  |
| --- | --- |
| **Documents provided:** |  |

The following documents are provided with this application -

|  |  |
| --- | --- |
| *Document description:* | *Prepared by:* |
| Documents as specified in Schedule 2 of the Director’s Specified List: |  |
|  |  |
|  |  |
|  |  |

**The plumbing work will be carried out in accordance with the *Building Act 2016, the Building Regulations 2016* and the National Construction Code.**

 *Name: [print] Signed Date*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Owner / Agent:*(Delete one not applicable)* |  |  |  |  |  |