

APPLICATION FOR DEMOLITION LICENCE

Local Government (Miscellaneous Provisions) Act 1960, S.374A
Building Regulations 1989, ref. 10 (2)

Building to be Demolished	Address	No	Street
		Lot No	Suburb
	To be Demolished	Type of Building, e.g. house, shed _____	
		Whole of Building Part only of Building – give details _____	
	Building Materials	Wall	_____
		Roof	_____
		Other	_____
	Is any Asbestos being removed		
Number of storeys:			
Previous use or classification:			
Estimated Cost of Work: \$			

Owner	Name:		
	Postal Address:		Post Code:
	Phone Numbers: (Hm)		(Wk)

Demolition Contractor	Name:		
	Postal Address:		Post Code:
	Phone Number:		Fax Number:

Applicant	Name:		
	Postal Address:		Post Code:
	Phone Numbers: (Hm)		(Wk)
	Fax Number:		Email:
	Signature:		Date:

Please Note: The building is to be baited for a minimum of 7-10 days prior to its removal to ensure that it is not infested with rodents.

Application Fees \$50.00 per storey

OFFICE USE ONLY

Site Inspection / Kerb Verge (if applicable) Report

Officer _____ **Dated** _____

Heritage List Check

Other Comments
