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| **REQUEST FOR COPY OF BUILDING RECORD INFORMATION** |
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| To: | West Tamar Council |  |

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|  | PO Box 16 | *Address* |

|  |  |  |
| --- | --- | --- |
|  | RIVERSIDE TAS 7250 | *Suburb/postcode* |

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| --- | --- |
| **Applicant Details:** |  |

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| --- | --- | --- | --- |
| Owner/Applicant: |  | Mobile No: |  |

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

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

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| --- | --- | --- |
| **Subject Property Details:** | |  |
|  |  | |
| Address: |  | |

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| **Selected Documents:** indicate by **✓** box |  |

|  |  |  |  |
| --- | --- | --- | --- |
|  | Architectural Plans |  | Soil Report |
|  | (Floor plans & Elevations) |  |  |
|  |  |  |  |
|  | Engineering Plans |  | Engineer’s Structural Certificate |
|  | (Structural drawings for footings, slab & Frame Bracing) |  |  |
|  |  |  |  |
|  | Specifications |  | Notices & Orders |
|  | (Written Specification of the Building Work) |  |  |
|  |  |  |  |
|  | Plumbing Plan |  | Planning |
|  | (“As Constructed” Sewer & Stormwater Drainage details) |  |  |
|  |  |  |  |
|  | Permit, Occupancy & Completion Certificates etc. |  |  |

Records will be sent via email to the address provided above

|  |  |
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| If you wish to collect the records please tick this box: |  |

|  |  |
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| **Declaration:** |  |

**Please Note:**

* To obtain copies of documents you must be the owner or have the owner’s consent in writing. This consent must be submitted with this request.
* Submission of this request can be made by email to [building@wtc.tas.gov.au](mailto:building@wtc.tas.gov.au) or by post
* Cost will be “Price on Application” this will be based on what is requested and time taken to prepare documentation. Hard copies will attract an additional fee
* The required fee must be paid prior to the issuing of documentation
* Please allow a week for receipt of documentation

|  |  |
| --- | --- |
|  | I am the owner of the above property |
|  |  |
|  | I am the applicant with written consent from the owner (attached) |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | *Name (Print)* |  | *Signed* |  | *Date* |
| Applicant/Owner: |  |  |  |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Payment Details:** | | |  |
|  | | |  |
| **Receipt No:** |  | **Date Issued:** |  |