

# BLUEPRINT BUILDING PERMITS

ABN 42 619 743 574 ACN 619 743 574

## APPLICATION FOR AN OCCUPANCY PERMIT

BUILDING ACT 1993, BUILDING REGULATIONS 2018 REGULATION 186(1)

FORM 15

|           |                                                                  |
|-----------|------------------------------------------------------------------|
| <b>To</b> | Relevant Building Surveyor of Blueprint Building Permits Pty Ltd |
|-----------|------------------------------------------------------------------|

|                                   |  |          |  |
|-----------------------------------|--|----------|--|
| <b>From: Owner/Agent of Owner</b> |  |          |  |
| Applicant Name                    |  |          |  |
| Postal Address:                   |  | Postcode |  |
| Contact Person:                   |  | Mobile:  |  |
| Email:                            |  | ACN:     |  |

In accordance with \*Section 42/\*Section 54 of the **Building Act 1993**, I apply for an occupancy permit for the \*building/\*place of public entertainment situated at—

|                         |  |          |  |         |           |         |  |
|-------------------------|--|----------|--|---------|-----------|---------|--|
| <b>Property Details</b> |  |          |  |         |           |         |  |
| Number:                 |  | Street:  |  | Suburb: |           |         |  |
| Lot/s:                  |  | LP/PS:   |  | Volume: |           | Folio:  |  |
| Crown Allotment         |  | Section: |  | Parish: |           | County: |  |
| Municipal District:     |  |          |  |         | Postcode: |         |  |

|                                                                                    |                 |                      |
|------------------------------------------------------------------------------------|-----------------|----------------------|
| <b>Building Practitioners and Architects who were engaged in the building work</b> |                 |                      |
| Name:                                                                              | Category/Class: | Registration Number: |
|                                                                                    |                 |                      |
|                                                                                    |                 |                      |
|                                                                                    |                 |                      |

|                                |  |
|--------------------------------|--|
| <b>Building Permit Details</b> |  |
| Permit Number:                 |  |

|                              |                                     |                          |                                        |
|------------------------------|-------------------------------------|--------------------------|----------------------------------------|
| <b>Nature of Application</b> |                                     |                          |                                        |
| <input type="checkbox"/>     | New building                        | <input type="checkbox"/> | Amendment to existing occupancy permit |
| <input type="checkbox"/>     | Alterations to an existing building | <input type="checkbox"/> | Change of use of an existing building  |
| <input type="checkbox"/>     | Place of public entertainment       | <input type="checkbox"/> | Other                                  |

|                        |              |                       |
|------------------------|--------------|-----------------------|
| <b>Use applied for</b> |              |                       |
| Part of Building       | Proposed Use | BCA Class of building |
|                        |              |                       |

To conduct public entertainment ☐

P.O Box 509 Preston 3072

Phone (03) 9052 2871

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## Certificates of compliance

Copies of compliance certificates for plumbing work and electrical work are attached in accordance with regulation 186(2)(b). ☐

|                        |  |       |          |
|------------------------|--|-------|----------|
| Signature of Applicant |  | Date: | / / 2025 |
|------------------------|--|-------|----------|