

## Application for a Building Permit

Form 1  
Regulation 24  
Building Act 1993  
Building Regulations 2018

All below fields are considered Mandatory and missing information may cause a delay in processing.

To: Municipal Building Surveyor

From

☐

Owner

☐

Agent of Owner

(tick applicable field)

Name: \_\_\_\_\_ ACN / ARBN: \_\_\_\_\_

Postal Address of Applicant: \_\_\_\_\_

Suburb: \_\_\_\_\_ Postcode: \_\_\_\_\_

Email: \_\_\_\_\_

Address for serving or giving of documents: \_\_\_\_\_

Indicate if the applicant is a lessee or licensee of Crown land to which this application applies ☐ Yes ☐ No

Contact Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

### Lessee responsible for Building Work

Indicate if a lessee of the building, of which part are leased by different person, is responsible for the alterations to a part of the building leased by that lessee: ☐ Yes ☐ No

### Ownership Details (not applicable if Owner Applicant)

Name of Owner/s: \_\_\_\_\_ ACN / ARBN: \_\_\_\_\_

Postal address: \_\_\_\_\_ Postcode: \_\_\_\_\_

Contact person: \_\_\_\_\_ Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

### Property Details

Number: \_\_\_\_\_ Street/Road: \_\_\_\_\_

Suburb: \_\_\_\_\_ Postcode: \_\_\_\_\_

Lot/s: \_\_\_\_\_ LP/PS: \_\_\_\_\_ Volume: \_\_\_\_\_ Folio \_\_\_\_\_

Allotment Area (for new dwelling only): \_\_\_\_\_ m<sup>2</sup>

Land owned by the Crown or a public authority: ☐ Yes ☐ No

### Builder (mandatory fields excluding Owner Builders)

Company Name: \_\_\_\_\_ ACN/ARBN \_\_\_\_\_

Postal address: \_\_\_\_\_ Postcode: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

Building Practitioner's Name: \_\_\_\_\_ Building Practitioner Registration No \_\_\_\_\_

If the builder is carrying out domestic building work under a major domestic building contract, attach an extract of the major domestic building contract showing the names of the parties to the contract in relation to the proposed building work and a copy of the certificate of insurance (if applicable).

### Natural Person for Service of Directions, Notices and Orders *(if Builder is a Body Corporate)*

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_  
 Postal Address: \_\_\_\_\_  
 Suburb: \_\_\_\_\_ Postcode: \_\_\_\_\_

### Building Practitioner or Architect engaged to prepare documents for this permit

*List any building practitioner or architect engaged to prepare documents forming part of the application for this permit.*

Company Name:	Name:	Category/Class:	Registration No:
		Architect/Draftsperson	
		Engineer	

### Nature of Building Work

- |   |   |
|---|---|
| <input type="checkbox"/> Construction of a new building         | <input type="checkbox"/> Alteration to an existing building           |
| <input type="checkbox"/> Demolition of a building               | <input type="checkbox"/> Removal of a building                        |
| <input type="checkbox"/> Extension to an existing building      | <input type="checkbox"/> Change of use of an existing building        |
| <input type="checkbox"/> Re-erection of a building              | <input type="checkbox"/> Construction of swimming pool or spa barrier |
| <input type="checkbox"/> Construction of swimming pool or spa   |   |
| <input type="checkbox"/> Other: <i>(give description)</i> _____ |   |

### Proposed Use of Building

\_\_\_\_\_

### Owner Builder

I intend to carry out the work as an Owner Builder:

Yes ☐ No ☐

Owner Builder Certificate of Consent No. *(if applicable)*

**Consent No:** \_\_\_\_\_

### Cost of Building Work

Is there a contract for the building work:

- ☐ Yes If yes, state the contract price: \$ \_\_\_\_\_
- ☐ No If no, state the estimated cost of the building work (including the cost of labour and materials) and attach details of the method of estimation \$ \_\_\_\_\_

### Stage of Building Work

If application is to permit a stage of the work -




Extent of stage: \_\_\_\_\_ Cost of work for this stage: \$ \_\_\_\_\_

### Signature

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_


## Application for a Building Permit

### Register Application











1.  **Email:** [buildingservices@cgd.vic.gov.au](mailto:buildingservices@cgd.vic.gov.au)
2.  **Mail**  
Post completed form with **cheque** to:  
City of Greater Dandenong  
PO BOX 200, Dandenong VIC 3175
3.  **In Person:** Visit a City of Greater Dandenong customer service centre and hand in the completed form.  
**Dandenong:** 225 Lonsdale Street, Dandenong  
**Springvale:** 5 Hillcrest Grove, Springvale  
**Parkmore:** Shop A7, Parkmore Shopping Centre  
Cheltenham Road Keysborough

### Payment

**Tax Invoice emailed after application has been registered**

4.  **Online Credit Card Payment** – (MasterCard or Visa)
  - ▼ Go to: [www.greaterdandenong.vic.gov.au](http://www.greaterdandenong.vic.gov.au)
  - [Building Services](#)
  - **Pay online**
  - Enter your **invoice number** and follow the prompts to make payment.

We respect your privacy. We will not sell or give away your personal information, unless required by law. Occasionally, we may use your details for our own research purposes or to let you know about other Council information. If you want to see your personal data, modify your details, or if you receive information from us you do not want in the future please contact Council on 8571 1000.

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