

Second Schedule
Form of Commencement Notice

(Notice to a Building Control Authority pursuant to Part II of the Building Control Regulations 1997-2009)



DUBLIN CITY COUNCIL
Building Control Division, Floor 2 Block 4 East,
Civic Offices, Wood Quay, Dublin 8

Please complete both pages! (See overleaf)

| OFFICIAL USE ONLY | |
|-------------------|-------|
| Date received: | _____ |
| Register Ref: | _____ |
| Entered on: | _____ |
| Entered by: | _____ |
| Fee Received: | _____ |

1.
I, the undersigned, hereby give notice/give notice on behalf of the person(s) named at 3. below*, to the above Building Control Authority (in accordance with Part II of the Building Control Regulations) that I/the persons named at 3. below* intend to carry out the works*, change of use* to which the Building Regulations apply as described below.
(* Cross out whichever is inappropriate)

Signature: _____ **Date:** _____ **Name (Block Capitals):** _____
Commencement Date (of works): _____ **Fee payable (€):** _____

2a. PROJECT PARTICULARS: *(In addition, for Residential Developments, please complete Section 2b below)*

Description of proposed development:

Floor Area (new or additional): _____ **square meters** **Previous Commencement Notice Nos:** _____

Location of development:

Planning Application Ref. (if applicable): _____ **Date of grant:** _____ **Date of expiry:** _____
Fire Safety Certificate. No (if applicable): _____ **Disability Access Cert. No. (if applicable):** _____

2b. Residential Development Information:

Total No. of Dwelling units (all phases): _____ **Total No. of Phases:** _____

Phase for this notice: _____ **No. of units for this phase/ notice:** _____

Commencement date for this phase: _____ **Proposed end-date for this phase:** _____

3. Building Owner Details:

Name: _____ **Please complete just the name here.**
Contact details are to be completed overleaf

4. Building Designer Details:

Name: _____ **Please complete just the name here**
Contact details are to be completed overleaf

5. Builder Details:

Name: _____ **Please complete just the name here**
Contact details are to be completed overleaf

Contact Details Page

The details on this page are for the information of Dublin City Council, it's staff and agents.

6. Information: Person(s) from whom such plans, documents and any other information, as are necessary to show that the building or works will, if built in accordance with design, comply with the requirements of the Building Regulations, may be obtained.

Name: _____ **Tel:** _____ **Fax:** _____

Address: _____ **Email:** _____

7. Site Contact: Person(s) from whom notifications of the pouring of any foundations and/or the covering up of any drainage systems may be obtained,

Name: _____ **Tel:** _____ **Fax:** _____

Address: _____ **Email:** _____

8. Contact details for person who signed the form

Name of person(s): _____ **Tel:** _____ **Fax:** _____

Address: _____ **Email:** _____

9. Building Owner Contact Details:

Name: _____ **Tel:** _____ **Fax:** _____

Address: _____ **Email:** _____

10. Building Designer Contact Details:

Name: _____ **Tel:** _____ **Fax:** _____

Address: _____ **Email:** _____

11. Builder Contact Details:

Name: _____ **Tel:** _____ **Fax:** _____

Address: _____ **Email:** _____

Contact Details Page