

## FORM OF APPLICATION FOR A REVISED DISABILITY ACCESS CERTIFICATE

**Building Control Acts 1990 and 2007  
Application for a Revised Disability Access Certificate**

**Building Control Authority:** Roscommon County Council  
**Address:** Áras an Chontae, Roscommon, Co. Roscommon, F42 VR98

**OFFICIAL USE**

Date Received \_\_\_\_\_  
Register Ref. \_\_\_\_\_  
Entered on \_\_\_\_\_  
Entered by \_\_\_\_\_  
Fee Received \_\_\_\_\_

Application is hereby made under Part IIIB of the Building Control Regulations 1997 to 2009 for a Revised Disability Access Certificate in respect of proposed works or building to which the accompanying plans, calculations and specifications apply.

**Original Disability Access Certificate application Reference No.:** \_\_\_\_\_

**Reason for Revised Disability Access Certificate application:** \_\_\_\_\_

**Planning Permission Reference No.:** \_\_\_\_\_

**1. APPLICANT: Owner / Leaseholder (delete as appropriate)**

**Full Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Telephone No.:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Owner of works or building (if different to above):**

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Telephone No.:** \_\_\_\_\_ **E-Mail:** \_\_\_\_\_

**2. Name and address of person/s or firm/s to whom notifications should be forwarded (Owner/Leaseholder or Designer/Developer/Builder):**

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Telephone No.: \_\_\_\_\_ E-mail \_\_\_\_\_

**3. Name and address of person/s or firm/s responsible for preparation of accompanying plans, calculations and specifications:**

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Telephone No. \_\_\_\_\_ E-mail \_\_\_\_\_

**4. Address (or other necessary identification) of the proposed works or building to which the application relates:**

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**5. Description of changes to the proposed works or building from original application:**

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<b>6. Detail Differences</b>	<b>Original Application</b>	<b>Revised Application</b>
Site area	_____ (sq. metres)	_____ (sq. metres)
Number of basement storeys	_____	_____
Number of storeys above ground level	_____	_____

6. Detail Differences (continued )	Original Application	Revised Application
Height of top floor above ground level	_____	_____
	(metres)	(metres)
Floor area of building	_____	_____
	(sq. metres)	(sq. metres)
Total area of ground floor	_____	_____
	(sq. metres)	(sq. metres)
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7. Amount of Fee (accompanying this application)	€ _____	
Fee €800		
<b>Revised set of working drawings and report must accompany this application.</b>		