



## FORM OF APPLICATION FOR A REVISED FIRE SAFETY CERTIFICATE

### Building Control Acts 1990 and 2007

### Application for a Revised Fire Safety Certificate

---

**Building Control Authority:**

**Roscommon County Council,  
Roscommon Fire Station,  
Circular Road,  
Roscommon,  
Co. Roscommon.**

**OFFICIAL USE**

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

---

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

*Original Fire Safety Certificate application Reference No. :* \_\_\_\_\_

*Reason for Revised Fire Safety Certificate Application:* \_\_\_\_\_

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

---

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

FULL NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

TELEPHONE No: \_\_\_\_\_

DATE: \_\_\_\_\_

Owner of works or building (if different to Applicant):

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

\_\_\_\_\_

---

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

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

---

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

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

---

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

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

---

5. Description of changes to the proposed works or building from original application (i)  
arising from the granting of planning permission or (ii) from the Fire Safety Certificate  
granted.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

---

6.	<u>Original Application</u>	<u>Revised Application</u>
Site Area	_____	_____
Number of basement storeys	_____	_____
	(sq. metres)	(sq. metres)
Number of storeys above ground level	_____	_____
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)

---

7. Amount of Fee (accompanying this application)    € \_\_\_\_\_

***Revised set of working drawings must accompany this application.***

---