

APPTYP:

Charge £

+VAT £

TOTAL CHARGE: £

Building Act 1984 & Building Regulations

BUILDING NOTICE

REPLACEMENT OF DOMESTIC, WINDOWS, DOORS & ROOFLIGHTS

This form should ideally be completed by the Installer on behalf of the applicant.

You need only make a Building Notice application where the installer is not registered under a Self-certification Scheme

PLEASE COMPLETE IN BLOCK LETTERS

* DELETE AS APPROPRIATE

1 Applicant's/Owner's details

Name:

Address:

Postcode:

Tel:

Email:

2 Installers details

Name:

Address:

Postcode:

Tel:

Email:

3 Location of building to which work relates

Address:

Postcode:

Tel:

Email:

4 Description of Existing Work to be altered

	Tick	How Many	Frame Type*	Glazing*
I will be replacing :	<input type="checkbox"/>	<input type="checkbox"/>	Metal / Wood / PVC-U	Single / Double / Triple
Windows	<input type="checkbox"/>	<input type="checkbox"/>	Metal / Wood / PVC-U	Single / Double / Triple
Doors	<input type="checkbox"/>	<input type="checkbox"/>	Metal / Wood / PVC-U	Single / Double / Triple
Rooflights	<input type="checkbox"/>	<input type="checkbox"/>	Metal / Wood / PVC-U	Single / Double / Triple

5 Description of Proposed Work

Commencement Date:

Will there be any structural alterations (e.g. Widening of openings, Bay window supports etc) YES / NO *

U-Value (area weighted average).....w/m²k

Double or Triple Glazed.....

Gap between Panes.....mm

Type of Frame.....METAL / WOOD / PVC-U

Thermal Break incorporated in frame.....YES / NO *

Low Emissivity Glazing to be used.....YES / NO *

Emissivity value.....

Argon Filled sealed units.....YES / NO *

Air Filled sealed units....YES / NO *

Type and thickness of Safety Glazing used in any location below 800mm for windows or 1500mm for doors

6 Have you enquired about or applied for Planning Permission

YES / NO *

If YES state Planning Application Number if known

App Ref No: DC/

7 Statement

This notice is given in relation to the building work as described, and is submitted in accordance with Regulation 12(2)(a) and is accompanied by the appropriate charge. (SEE ATTACHED NOTES)

Name:

Signature:

Date: