

**PROJECT APPLICATION FORM FOR MEZZANINE BUILDING WORK**

1. What is the postal address of the site:

-----  
----- Postcode: -----

2. Brief description of the building work (max 25 words):

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3. Existing use of the building (ie domestic, retail, warehouse etc):

Proposed use of the building: -----

4. Total number of levels to the structure -

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5. Project Details

Anticipated start date ----- Site Duration: -----

Estimated Cost of the works: £ -----

Agreed Fee £ ----- +VAT PO Number: -----

6. APPLICANTS DETAILS e.g. Architect, Designer, Developer

Contact: ----- Tel: -----

Company: ----- Mob: -----

Address: -----

Postcode ----- Email: -----

7. OCCUPIER/OWNER/CLIENT for the Building Work [stated in point 2 as above]

Contact: ----- Tel: -----

Company: ----- Mob: -----

Address: -----

Postcode ----- Email: -----

8. Please indicate to whom Integral BCS should INVOICE (if not Applicant):

Contact: ----- Tel: -----

Company: ----- Mob: -----

Address: -----

Postcode ----- Email: -----

9. CORRESPONDENCE

Original to Applicant or other:

Name: ----- Tel: -----

Company: ----- Mob: -----

Email: -----

Copies to

Name: ----- Email: -----

## 10. SITE CONTACT (Builder/Main Contractor)

Contact: \_\_\_\_\_ Tel: \_\_\_\_\_  
 Company: \_\_\_\_\_ Mob: \_\_\_\_\_  
 Email: \_\_\_\_\_

11. The works does not consists of a new building or an extension to an existing building.

## 12. DRAINAGE

a. The proposed work **will not** involve the creation of a foul or surface water below ground drain that served more than one property.

b. Will there be an external below ground connection to the existing foul or surface water drains **YES NO N/A**

c. Will an existing public sewer need to be diverted? **YES NO N/A**

13. Does the building and proposed floor have fire detection **YES NO N/A**

14. Does the building and proposed have break-glass units **YES NO N/A**

15. Does the building and proposed floor have sprinklers **YES NO N/A**

16. Is fire detection and emergency lighting in this contract **YES NO N/A**

17. Is 60 min fire resistance provided to columns and ceiling **YES NO N/A**

18. Is the structure racking supported **YES NO N/A**

19. Are stairs enclosed with 30 minutes fire resistance **YES NO N/A**

Rooms to proposed floor

20. Is there enclosed rooms above or below the new floor **YES NO N/A**

21. Are the offices less than 20% of the whole building **YES NO N/A**

22. Are partition walls and ceiling fire rated **YES NO N/A**

23. Is there new space heating and insulation **YES NO N/A**

24. Has ventilation been provided to new rooms **YES NO N/A**

25. Is there proposed above or below ground foul drainage **YES NO N/A**

26. I agree that Integral BC Solutions Ltd can sign the Initial Notice and any other Notices on my behalf.

**Integral BC Solution will serve the Initial Notice on the Local Authority once we have received the required information. Building work should not commence until the notice has been accepted**

**this may take up to 5 days following submission**

**The limits to Integral BCS Ltd's liabilities is set to no more than the Estimated Cost of Works sum as above or the limitations set by our Insurers – whichever is the lesser.**

**Returning the completed application forms should be considered as an agreement to enter into a contract with Integral BCS Ltd and as an agreement to our terms and conditions which can be found at**

**<http://integralbcs.co.uk/building-control-services/terms-and-conditions>**

To be signed by the client to confirm appointment as your Building Control Body

Signature: \_\_\_\_\_ Name: \_\_\_\_\_ Date: \_\_\_\_\_