

Building Regulations Reversion Form

The Building Act 1984
The Building Regulations 2010

(Fields noted * are Mandatory)

1

Location of building to which work relates

Address: *

Postcode: *

2

Owner's details

Mr/Mrs/Miss/Ms: *

Forenames: *

Surname: *

Address: *

Address: *

Postcode: *

Email:

Tel: *

Mobile:

3

Agent's details (if applicable)

Name:

Address:

Address:

Postcode:

Email:

Tel:

Mobile:

4

Builder's details

Name:

Address:

Address:

Postcode:

Email:

Tel:

Mobile:

Contact Details

Telephone: 020 8379 3624
Email: building.control@enfield.gov.uk
Website: www.enfield.gov.uk

Address:
London Borough of Enfield
Building Control Services
PO Box 53, Civic Centre, Silver Street
Enfield, Middlesex, EN1 3XE

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Electrician:

If this application is for a Residential project which involves the installation of new electrical works, please confirm if you are intending to use a Registered "Part P" qualified Electrician, who is an Authorised Competent Person.

If no, please be advised this will incur a further charge.

YES / NO *

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Proposed / Completed works

Description of proposed / completed building work: *

7

Date the Works Commenced

Date: *

8

Use of building

1. If new Building or extension please state proposed use: *

2. If existing building state present use: *

3. Is the building to be put to a use which is regulated by the Regulatory Reform (Fire Safety) Order 2005

YES /NO *

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For New Build Dwellings and Newly Created Dwelling Only

Do you have Planning Permission?

YES NO *

Have Planning Specified any Optional Requirements?

YES NO *

Awaiting Permission *

Please Specify the Number of Units Required Under the Following Categories;

Part M4 (1) Visitable Dwellings..... _____

Part M4 (2) Accessible and Adaptable Dwellings... _____

Part M4 (3) Wheelchair User Dwellings..... _____

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Fees* (see Building Control Charges form for guidance)

Fee description

Fee Submitted (£)

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Statement

I have read and understood the guidelines and completed this form with information which I believe is accurate.

This notice is submitted in accordance with regulations 12 (2)(b), 12 (2)(a) or 18 (2) and is accompanied by the appropriate fee.

This application is valid for 3 years from the date of deposit, to commence the works.

Name: *

Date: *

Notes:

- 1. This notification to the Local Authority is to be made in circumstances where an Initial Notice ceases to be in force.**
- 2. Initial Notices are those that are issued to Local Authorities by Approved Inspectors who intend to control the Building Regulation function.**
- 3. Should an Approved Inspector issue to the Local Authority a cancellation notice, their function ceases and the Local Authority then controls the works.**
- 4. Owners and persons carrying out the works are required to provide the Local Authority with plans to enable them to carry out their functions.**
- 5. A copy of the Cancellation notice is enclosed.**
- 6. Payments should be made by cheque only.**