

Office Use Only

Application Number: _____ Application Fee: _____ Receipt Number: _____
 Date Received: ____ / ____ / ____ Receiving Officer: _____

TYPE OF APPLICATION:

- Swimming pool fence compliance inspection
- Exemption for access for persons with disabilities
- Occupation of non residential building for residential use
- Assessment of alternate solution for QDC MP 2.1 & 2.2 – Budget Accommodation
- Assessment of new residential services building compliance under QDC MP 5.7
- Other (specify)

Please ensure a site plan and floor plan of any existing buildings, pool and pool fencing are supplied with this application.

APPLICANT DETAILS

Name:		
Company Name: (if applicable)		
Postal Address:		
	Postcode:	
Telephone Number:	Mobile Number:	
Facsimile Number:		
Email:		

PROPERTY DETAILS

Address:		
	Postcode:	
Current Lot Number:		
Plan Number:		
Area:		

Information Privacy Collection Notice

Ipswich City Council is collecting your personal information in accordance with the *Building Act 1975* so that we can process your application and perform our responsibilities under the Act. We will not disclose your personal information outside of Council unless we are required by law or you have given your consent. However, in order to perform the above functions we may need to disclose your personal information to the Chief Executive who may in turn make this information available to others in accordance with the Act. By completing and signing this form and returning it to Council, we will consider that you have given us your consent to manage your personal information in the manner described in Council's Privacy Statement, Personal Information Digest and this collection notice.



IPSWICH CITY COUNCIL
SWIMMING POOL FENCING AND OTHERS
Building Act 1975

OWNERS DETAILS

Name:	
Postal Address:	
	Postcode:
Telephone Number:	Mobile Number:
Signature (Company Seal or ACN):	
Date:	

DETAILS OF REQUEST

GROUNDS FOR CONSIDERATION/VARIATION
 (Attach additional paper, if required)
