

An Roinn Pleanála  
Rannán Sábháilteacht Dóiteáin  
Bosca 174  
Áras an Chontae  
Sord  
Fine Gall,  
Contae Átha Cliath

Planning Department  
Fire Safety Section  
P.O. Box 174  
County Hall  
Swords  
Fingal, Co. Dublin

Telephone  
(01) 890 5542  
Facsimile  
(01) 890 6779  
Email  
planning@fingal.ie  
www.fingal.ie

Comhairle Contae  
Fhine Gall  
Fingal County  
Council



## Application for a Revised Fire Safety Certificate *Building Control Acts 1990 and 2007*

ALL RELEVANT SECTIONS TO BE COMPLETED

### FOR OFFICE USE ONLY

Date Received: \_\_\_\_\_

Registered ref.: \_\_\_\_\_

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: \_\_\_\_\_

Date: \_\_\_\_\_

Tel No.: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

Owner of works or building (If different to above):

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

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

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

Tel No.: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

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

Tel No.: \_\_\_\_\_

Fax: \_\_\_\_\_

Email: \_\_\_\_\_

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

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**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:

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<b>6. Site Area:</b>	<b>Original Application</b>	<b>Revised Application</b>
Number of basement storeys	<hr/> (Sq. metres)	<hr/> (Sq. metres)
Number of storeys above ground level	<hr/>	<hr/>
Height of top floor above ground level	<hr/> (metres)	<hr/> (metres)
Floor area of building	<hr/> (Sq. metres)	<hr/> (Sq. metres)
Total area of ground floor	<hr/> (Sq. metres)	<hr/> (Sq. metres)

**7.** Amount of **fee** (Accompanying this application): € 

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