

Boston Borough Council Building Control Section, The Building Act 1984 The Building Regulations 2010 Municipal Buildings, West Street, Boston PE21 8QR Contact Details
Tel: 01205 314295
E-mail:buildingcontrol@boston.gov.uk
Website: www.boston.gov.uk

Information required by a person applying for a regularisation certificate for building work to be provided as far as is reasonably practicable (England)

Building Regulations 2010 (as amended).

Where a local authority receives an application in accordance <u>Regulation 18</u>, they may require the applicant to take such reasonable steps as the authority think appropriate to ascertain what work, if any, is required to secure that the relevant requirements are met.

Name of the client
Address of the client
Talambana mumbar of the aliant
Telephone number of the client
Email address of the client (if available)
I confirm that to the best of my knowledge the work complies with all applicable requirements of the building regulations.
Signature of client
Name of principal contractor (or sole contractor)
Address of principal contractor (or sole contractor)
Telephone number of the principal contractor (or sole contractor)
Email address of the principal contractor (or sole contractor)
Date of appointment
I confirm that I have fulfilled my duties as a principal contractor (or sole contractor)
under Part 2A (dutyholders and competence) of these Regulations.
Signature of principal contractor (or sole contractor) Date

**Name of principal contractor (or sole contractor)
Address of principal contractor (or sole contractor)
Telephone number of the principal contractor (or sole contractor)
Email address of the principal contractor (or sole contractor) (if available)
Date of appointment
I confirm that I have fulfilled my duties as a principal contractor (or sole contractor)
under Part 2A (dutyholders and competence) of these Regulations.
Signature of principal contractor (or calc contractor)
Signature of principal contractor (or sole contractor)
Date
Name of principal designer (or sole designer)
Address of principal designer (or sole designer)
Telephone number of the principal designer (or sole designer)
Email address of the principal designer (or sole designer)
Date of appointment
l confirm that I have fulfilled my duties as a principal designer (or sole designer) under
Part 2A (dutyholders and competence) of these Regulations.
Signature of principal designer (or sole designer)
Date
Dute
**Name of principal designer (or sole designer)
Address of principal designer (or sole designer)
Telephone number of the principal designer (or sole designer)
Email address of the principal designer (or sole designer)
Date of appointment
I confirm that I have fulfilled my duties as a principal designer (or sole designer) under
Part 2A (dutyholders and competence) of these Regulations.
Signature of principal designer (or sole designer)
Date
=

^{**}If more than one dutyholder appointment is made, details and confirmation is required by each principal contractor (or sole contractor) and each principal designer (or sole or lead designer) appointed by the client. Add additional contacts and statements as required.