



**LIMERICK CITY & COUNTY COUNCIL  
FIRE & EMERGENCY SERVICES  
LISSANALTA HOUSE  
DOORADOYLE ROAD  
LIMERICK  
Tel: 061 496859 Fax 061 583834  
Email: fireservice@limerick.ie**

**Office use only**

Date received: \_\_\_\_\_  
Register ref: \_\_\_\_\_  
Entered on: \_\_\_\_\_  
Entered by: \_\_\_\_\_  
Fee received: \_\_\_\_\_

## **CLAIM FOR EXEMPTION FROM PAYMENT OF FEE**

I \_\_\_\_\_ on behalf of

\_\_\_\_\_  
\_\_\_\_\_

Address \_\_\_\_\_

**hereby claim exemption from payment of fee under Section 22 of the Building Control Regulations 1997 - 2013 in respect of application for a (tick as appropriate)**

Commencement Notice	<input type="checkbox"/>	Fire Safety Certificate	<input type="checkbox"/>	Disability Access Certificate	<input type="checkbox"/>
7 Day Notice	<input type="checkbox"/>	Revised Fire Safety Certificate	<input type="checkbox"/>	Revised Disability Access Certificate	<input type="checkbox"/>
Relaxation	<input type="checkbox"/>	Regularisation Certificate	<input type="checkbox"/>	Dispensation	<input type="checkbox"/>

**for the following development:**

\_\_\_\_\_  
at \_\_\_\_\_

**in that the development is: Please answer EACH question in Section 1, Section 2 and / or Section 3 as appropriate to the application**

## **SECTION 1**

- (a) development proposed to be carried out by or on behalf of a voluntary organisation  
YES / NO (*delete as appropriate*)
- (b) designed or intended not to be used mainly for profit or gain  
YES / NO (*delete as appropriate*)
- (c)
- |   |   |
|---|---|
| <input type="checkbox"/> by inhabitants of locality generally             | YES / NO ( <i>delete as appropriate</i> ) |
| <input type="checkbox"/> by a particular group                            | YES / NO ( <i>delete as appropriate</i> ) |
| <input type="checkbox"/> by people of a particular religious denomination | YES / NO ( <i>delete as appropriate</i> ) |
- (d) FOR
- |                       |   |
|-----------------------|---|
| Social Purposes       | YES / NO ( <i>delete as appropriate</i> ) |
| Educational Purposes  | YES / NO ( <i>delete as appropriate</i> ) |
| Recreational Purposes | YES / NO ( <i>delete as appropriate</i> ) |
| Religious Purposes    | YES / NO ( <i>delete as appropriate</i> ) |

## **SECTION 2**

As a hostel, workshop or other accommodation for disabled, poor or homeless persons and is not to be used mainly for profit or gain  
YES / NO (*delete as appropriate*)

## **SECTION 3** (Fee exemption for Disability Access Certificate or a Revised Disability Access Certificate only)

By or on behalf of a primary school, where the maximum number of mainstream teachers employed is or will be 4 or less.

YES / NO (*delete as appropriate*)

**Signed:** \_\_\_\_\_ **on behalf of**

\_\_\_\_\_

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