



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

Office use only

Date received: _____
Register ref: _____
Entered on: _____
Entered by: _____
Fee received: _____

**BUILDING CONTROL ACTS 1990 and 2007
APPLICATION FOR A REVISED FIRE SAFETY CERTIFICATE**

TO: LIMERICK CITY AND COUNTY COUNCIL

Application is hereby made under Part III of the Building Control Regulations 1997 to 2014, for a fire safety certificate in respect of the 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 _____

Telephone No. _____ Date _____

Owner of works or building (if different to above)

2.	Name and address of person/s or firm/s to whom notification should be forwarded (Owner/Leaseholder or Designer/Developer/Builder)	<hr/> <hr/> <hr/>									
3	Name and address of person/s or firm/s responsible for preparation of accompanying plans, calculations and specifications	<hr/> <hr/> <hr/>									
4.	Address (or other necessary identification) of the proposed works or building to which the application relates	<hr/> <hr/>									
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.	<hr/> <hr/> <hr/>									
6.	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%; padding-bottom: 10px;">Site area</td> <td style="width: 30%; text-align: center; padding-bottom: 10px;"><u>Original</u> <u>Application</u></td> <td style="width: 30%; text-align: center; padding-bottom: 10px;"><u>Revised Application</u></td> </tr> <tr> <td style="padding-bottom: 10px;">Number of basement storeys</td> <td style="text-align: center; padding-bottom: 10px;"> <hr style="border: none; border-top: 1px solid black;"/> (sq. metres) </td> <td style="text-align: center; padding-bottom: 10px;"> <hr style="border: none; border-top: 1px solid black;"/> (sq. metres) </td> </tr> <tr> <td style="padding-bottom: 10px;">Number of storeys above</td> <td style="text-align: center; padding-bottom: 10px;"> <hr style="border: none; border-top: 1px solid black;"/> </td> <td style="text-align: center; padding-bottom: 10px;"> <hr style="border: none; border-top: 1px solid black;"/> </td> </tr> </table>	Site area	<u>Original</u> <u>Application</u>	<u>Revised Application</u>	Number of basement storeys	<hr style="border: none; border-top: 1px solid black;"/> (sq. metres)	<hr style="border: none; border-top: 1px solid black;"/> (sq. metres)	Number of storeys above	<hr style="border: none; border-top: 1px solid black;"/>	<hr style="border: none; border-top: 1px solid black;"/>	
Site area	<u>Original</u> <u>Application</u>	<u>Revised Application</u>									
Number of basement storeys	<hr style="border: none; border-top: 1px solid black;"/> (sq. metres)	<hr style="border: none; border-top: 1px solid black;"/> (sq. metres)									
Number of storeys above	<hr style="border: none; border-top: 1px solid black;"/>	<hr style="border: none; border-top: 1px solid black;"/>									

ground level		
Height of top floor above ground level	_____ (metres)	_____ (metres)
Floor area of building	_____ (sq. metres)	_____ (sq. metres)
Total area of ground floor	_____ (sq. metres)	_____ (sq. metres)
7. Amount of Fee (accompanying this application)	€ _____	
<i>Revised set of working drawings must accompany this application</i>		

Note: The following copies of documents need to be submitted: 2 x this application form, 2 x Site location map, 2 x site layout plan, 2 x drawings and 2 x compliance report. Forward to, *LIMERICK CITY AND COUNTY COUNCIL, Fire & Emergency Services, Lissanalta House, Dooradoyle, Limerick*