APPLICATION FOR **DEMOLITION PERMIT**

The Streets and Buildings Regulation Law (Ch. 96)

	COMPETENT AUTHORITY			R OFFICIA lication No.	AL USE :			
1.	Applicant's / Owner's D (a) Full Name:							
	(c) Identity Card No:(d) Address:		Company Regist	Company Registration No:				
2.	Postcode: Tel.: Fax:							
	Postcode:		Tel. :		Fax:			
3.	Authorized Designer / S (a) Full Name:		ETEK Registration No:					
4.	Correspondence Addre							
	Postcode:		Tel.:					
5. 6.	Planning Permit Details (In case the building is located in an area of special character or is listed) Planning Authority: No. of Planning Permit: Date of issue:							
0.	Plot Details: Registration Certificate No:		Date of Registration:					
	Address	Parish / Area	Plan No. (Sheet / Plan)	Section	Plot No.	Plot Area (m2)		
7.	Description of load-bea (To be taken into account whether t	_				of waste material		

				5/2011		
8.	Appointment of Designer & Supervising Engi	ineer				
	I the underlined owner of the plot with the details given in S make it known to the Competent Authority that, the Supervisi the provisions of the Streets and Buildings Regulations Legis	ing Eng	ineer for the i			
	Declaration of Acceptance by Designer and / or Supervis	gineer (delete what does not apply).				
	Designer of Architectural Work		Supervisor of Architectural Work			
	Full Name:Signature / Seal:			Full Name::		
				Signature / Seal:		
	ETEK Registration No:		ETEK Registration No:			
	Address:		Address:			
	Telephone: Fax: Fax:		Telephone: Fax:			
	Structural Engineering Work Designer		Structural Engineering Work Supervisor			
	Full Name:		Full Name:			
	Signature / Seal:		Signature / Seal:			
	ETEK Registration No.:		ETEK Regis	stration No:		
	Address:					
	Telephone: Fax:			Fax:		
9.	Declaration of Applicant					
<u> </u>	Furthermore I declare that: I have been informed of the cont Application are true and correct and the Application is accomin accordance with the requirements of the Legislation and the	npanied	by the Certif	icates, Forms, Drawings Studies and Calculations,		
N/A	Applicant's Name / Plenipotentiary Representative	Identi	ty Card No.	Signature of Applicant / Plenipotentiary Representative		
1						
2						
3						
4.						
5						
10.	Date:					
11.	Seal (in case the applicant is company or Organization)					
	(in case the approach to company or organization)					

12. Certification of signatures, in case there are more than one owner (the certification can be done by a certifying officer or by the authorized designer)							
I certify that the above mentioned applicants have signed Section 12 of this Form (Applicant's Certification) in front of me presenting their identity card, which I have checked.							
Identity Card No.	Signature	Date					
	officer or by the authorized designer) igned Section 12 of this Form (Applie	officer or by the authorized designer) igned Section 12 of this Form (Applicant's Certification) in front of					