



APPLICATION CLOSURE NOTIFICATION

Section A: To Be Completed by Cork City Council:

Type of Application: _____	Licence No. _____
Bond Paid: _____	Receipt No. _____
Location: _____	Inspectoral Area: _____
Date Received: _____	Date Finalised: _____

Section B: Declaration by Applicant

I declare that the works under the above licence number are completed and the area is clear of all building material etc and is now ready for Inspection by Cork City Council's Road's Department.

I further requested that the bond in the amount of €_____ paid under receipt number _____ be processed subject to the area under the above licence being Certified in Order.

Any other Comments:

Name: _____ Signed: _____

Company: _____ Date: _____

Contact Phone Number: _____

Please provide details & PPS Number or Tax Reference Number to whom the refund should be made: (Please note this should match the name on the receipt)

Please return completed forms as soon as the works are completed to the following:

*Cork City Council,
Asset Management/Roads Maintenance Division
Room 338
City Hall,
Cork.
T12 T997*

**PLEASE RETURN THIS FORM WITHIN 2 WEEKS OF
COMPLETION OF WORKS.**