

APPLICATION FOR A DISABILITY ACCESS CERTIFICATE

**Comhairle Cathrach Chorcaí**  
Cork City Council



Building Control Section  
City Hall - Anglesea Street - Cork

Application is hereby made under Part IIIB of the Building Control Regulations, 1997 to 2009 for a Disability Access Certificate in respect of the works or Building to which the accompanying plans, calculations and specifications apply.

**OFFICE USE ONLY**

Date received: \_\_\_\_\_  
Register Ref.: \_\_\_\_\_  
Entered on: \_\_\_\_\_  
Entered by: \_\_\_\_\_  
Fee Received: \_\_\_\_\_  
Receipt No: \_\_\_\_\_

**1. APPLICANT:** Owner/Leaseholder (delete as appropriate)

FULL NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

TELEPHONE NO. \_\_\_\_\_ DATE \_\_\_\_\_

**Owner of works or building** (if different to above) \_\_\_\_\_

FULL NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

**2. Name and address of persons/s or firm/s to whom notifications should be forwarded  
(Owner/Leaseholder or Designer/Developer/Builder)**

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

Phone No.

Fax No.

**3. Name and address of person/s or firm/s responsible for preparation of accompanying plans,  
calculations and specifications.**

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

Phone No.

Fax No.

**4. Address (or other necessary identification) of the proposed works or building to which the  
application relates.**

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

**5. Classification of works or building: (please tick as appropriate)**

- |                                |            |           |
|--------------------------------|------------|-----------|
| • Construction of new building | <u>YES</u> | <u>NO</u> |
| • Material alteration          | <u>YES</u> | <u>NO</u> |
| • Material change of use       | <u>YES</u> | <u>NO</u> |
| • Extension to a building      | <u>YES</u> | <u>NO</u> |

Brief description of building:

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**6. Use of proposed works or building**

(a) Existing use (where a change is proposed) \_\_\_\_\_

(b) New Use \_\_\_\_\_

**7. Has planning permission been applied for and granted for works or building?**

(a) Date permission was granted \_\_\_\_\_

(b) Planning permission No. \_\_\_\_\_

**8. In the case of**

**(a) Works involving the construction of a building, or a building the material use of which is being changed -**

Site area \_\_\_\_\_ (sq. metres)

Number of basement storeys \_\_\_\_\_

Number of storeys above ground level \_\_\_\_\_

Height of top floor above ground level \_\_\_\_\_ (metres)

Floor area of building \_\_\_\_\_ (sq. metres)

Total area of ground floor \_\_\_\_\_ (sq. metres)

**(b) Works involving an extension or the material alteration of a building:**

Floor area of building extension \_\_\_\_\_ (sq. metres)

Floor area of material alteration \_\_\_\_\_ (sq. metres)

**9.Amount of Fee (accompanying this application)**

€ \_\_\_\_\_

**This Application Form must be accompanied by a complete and certified set of drawings for the works or building.**

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*We request that you read these as they contain important information about how we process personal data that is supplied to us.”*