MK Building Control

Civic, 1 Saxon Gate East, Central Milton Keynes, MK9 3EJ

E-Mail: building.control@milton-keynes.gov.uk

Telephone: 01908 252721

Name of the client

Website: www.buildingcontrolmk.com



Information required by a person applying for a regularisation certificate for building work to be provided as far as is reasonably practicable (England)

Building Regulations 2010 (as amended).

Where a local authority receives an application in accordance <u>Regulation 18</u>, they may require the applicant to take such reasonable steps as the authority think appropriate to ascertain what work, if any, is required to secure that the relevant requirements are met.

Address of the client			
Telephone number of the client			
Email address of the client (if available)			
	cnowl	ledge the work complies with all applicable requirements of the	
building regulations.		reage the work complies with an applicable requirements of the	
Signature of client		I agree that my electronic signature is the	
8		legal equivalent of my manual/handwritter	1
		signature on this document.	
Date			
		1	
Name of principal contractor (or	r		
sole contractor)			
Address of principal contractor	(or		
sole contractor)			
Telephone number of the princi	pal		
contractor (or sole contractor)			
Email address of the principal			
contractor (or sole contractor)			
Date of appointment			
I confirm that I have fulfilled my	dutie	es as a principal contractor (or sole contractor) under Part 2A	
(dutyholders and competence) o	of thes	se Regulations.	
Signature of principal		I agree that my electronic signature is the	
contractor (or sole contractor)		legal equivalent of my manual/handwritter signature on this document.)
Date		Signature on this document.	

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Name of principal contractor (or				
sole contractor)				
Address of principal contractor (or	r			
sole contractor)				
Telephone number of the principa	ıl 📗			
contractor (or sole contractor)				
Email address of the principal				
contractor (or sole contractor)				
Date of appointment				
I confirm that I have fulfilled my du	uties as a principal contractor (c	or sole contractor) under <u>Part 2A</u>		
(dutyholders and competence) of t	hese Regulations.			
Signature of principal		I agree that my electronic signature is the		
contractor (or sole contractor)		legal equivalent of my manual/handwritten		
Date		signature on this document.		
Date				
Nows of principal designantance				
Name of principal designer (or sol	e			
designer)				
Address of principal designer (or				
sole designer)				
Telephone number of the principa	al .			
designer (or sole designer)	"			
Email address of the principal				
designer (or sole designer)				
Date of appointment				
	uties as a principal designer (or	sole designer) under Part 2A		
I confirm that I have fulfilled my duties as a principal designer (or sole designer) under <u>Part 2A</u> (<u>dutyholders and competence</u>) of these <u>Regulations</u> .				
Signature of principal designer		I agree that my electronic signature is the		
(or sole designer)		legal equivalent of my manual/handwritten		
(5. 55.5 designer)		signature on this document.		
Date				

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**Name of principal designer (o	r			
sole designer)				
Address of principal designer (or	r			
sole designer)				
- '				
Telephone number of the princi	pal			
designer (or sole designer)				
Email address of the principal				
designer (or sole designer)				
Date of appointment				
I confirm that I have fulfilled my duties as a principal designer (or sole designer) under Part 2A				
(dutyholders and competence) of these Regulations.				
Signature of principal designer		I agree that my electronic signature is the		
(or sole designer)		legal equivalent of my manual/handwritten signature on this document.		
Date		signature on this document.		
**If more than one dutyholder appointment is made, details and confirmation is required by each				
principal contractor (or sole contractor) and each principal designer (or sole or lead designer) appointed				
by the client. Add additional contacts and statements as required				

Instructions: We recommend you download and fill out the form in <u>Acrobat Reader</u>. Complete all fields, and Save the form on your device, and <u>email us</u> all necessary documents. If using a web browser to fill out the form, complete all fields, Save the form on your device, and <u>email us</u> all necessary documents. To open embedded links and avoid losing changes, hold down Ctrl+Shift (MacOS is command \Re) and click on link to open in new tab.