

Application Received

Reference No.....

Dates of Submission

Decision Date.....

MINISTRY OF THE ENVIRONMENT, NATURAL RESOURCE, PHYSICAL PLANNING AND FISHERIES
PHYSICAL PLANNING DIVISION

**APPLICATION FOR PERMISSION
TO UNDERTAKE BUILDING OPERATIONS**
(Physical Planning Act No.5 of 2002)

I/We hereby apply for permission to carry out development described in application and on the attached plans and drawings.

Signed.....

Date.....

Physical Planning Division
3 Charles Avenue
Goodwill
COMMONWEALTH OF DOMINICA.

Telephone No. 266-3751/3752/3753

NOTE TO APPLICANT (S)

1. Has any previous application for planning permission been made for any part of the land or building which is the subject of this application?

Yes [] No []

If yes, state the Registered Number and/or date, and whether

Outline [] or Further Final []

2. Nature of Development (tick):

New Building []

Addition to Existing Structure []

Change of Use []

Other [] Specify

3. (a) Full Name, Address and Telephone Number of Applicant

.....
.....
.....
.....

(State whether Mr., Mrs. or Miss)

(b) Name, Address and Telephone Number of person/firm to whom correspondence relating to this application should be addressed.

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.....

(c) Interest of Applicant in the land (e.g. owner, lease-holder, tenant, co-owner, prospective purchaser).

.....
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.....
.....

(d) State whether this application is submitted with the knowledge and approval of the owner of the land:

Yes [] No []

4. If applicant is NOT owner, give particulars with respect to owner.

Name

Address

.....

Telephone Number

Note: Omission or falsification of any information required in this form may invalidate the application.

5. Location of Land:

Town or Village

Street

Lot No.

6. Ownership Declaration:

(a) "I, hereby certify that I am owner of the land to which this proposal relates."

.....
Signature of Developer.

Date

(b) "I, hereby certify that the owner(s) of the land to which this proposal relates has agreed for me to develop the said land."

.....
Signature of Developer.

Date

.....
Signature of Owner.

Date

7. Agent (Person for firm completing Application Form):

Name

Address

.....

Telephone Number

Signature

Date

Note: Proof of ownership or evidence of notification to owner that present application is being made may be required.

8. Is there a building on the site?

Yes [] No []

1.1 If yes, state present use (see clarification at 9 below)

.....

1.2 Is the building to be demolished?

Yes [] No []

9. Intended use of Existing/Proposed building:

- (a) Residential
 - (i) Single Family []
 - (ii) Two Family []
 - (iii) Multiple Family []
- (b) Mixed use
 - (i) Residential/Professional []
 - (ii) Residential/Commercial []
- (c) Business
 - (i) Commercial []
 - (ii) Industrial []
 - (iii) Other [] Specify.....
- (d) Institutional
 - (i) Specify.....

- 10. (i) Total Site Area
- (ii) Total Floor Area.....

11. Services

Are the following available on site?

- (i) Electricity Yes [] No []
- (ii) Potable Water Supply Yes [] No []
- (iii) If no, specify source of water supply.....

12. Proposed Drainage:

- (i) Surface Drainage (Storm)
 - Pipes [] Concrete Drains []
- (ii) Foul Drainage (Sewerage)
 - Sewerage System [] Septic Tank []
 - Pit Latrine [] Other (Specify)

13. For Multiple Residential Use:

Type of Dwelling Unit No. of Units Unit Floor Area (Gross) Total Floor Area (Gross)

- (a) Bed Sitter
- (b) One Bedroom
- (c) Two Bedroom
- (d) Three Bedroom
- (e) Four Bedroom
- (f) Four + Bedroom

14. For Mixed Use:

- (a) Floor area allocated to each use:
 - Residential
 - Commercial
 - Professional
 - Other (Specify)

15. For Commercial and Industrial use:

- (a) Nature of proposed business and floor area:
 - Office
 - Shop
 - Factory
 - Other (Specify)
- (b) Proposed number of employees on completion of development:
 - Male Female
- (c) Description of process to be carried on:
 -
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 -
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(d) Detailed Composition of Trade Refuse and Effluent and Means of Disposal:

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16. Parking provisions for employees/residents/visitors/customers/loading and unloading.*

<i>Estimated</i>	<i>Number of Parking Spaces</i>		
	<i>On Site</i>	<i>Off Site</i>	<i>Total</i>
Employees/Residents			
Visitors/Customers			
Loading			
Unloading			

17. Estimated cost of new work: EC\$.....

18. Fee payable EC\$.....

*Delete what which is inapplicable