



Notice of Completion by a person carrying out building work (England)

Building Regulations 2010 (as amended).

A person who is required by <u>Regulation 12</u> to give a building notice or an application for building control approval with full plans for carrying out building work shall, not more than five days after that work has been completed, give the local authority a notice which complies with <u>Regulation 16 paragraph (4A)</u> as set out below. Requirements of dutyholders and their competence can be found in <u>Part 2A of the Building Regulations 2010 (as amended)</u>.

The building work referred to in our building notice / application of building control approval with full plans* is complete (notice/application form attached to this notice). *delete as appropriate.

Name of the client
Address of the client
Telephone number of the client
Email address of the client (if available)

I confirm that to the best of my knowledge the work complies with all applicable requirements of the building regulations.

Name of principal contractor (or sole contractor)
Address of principal contractor (or sole contractor)
Telephone number of the principal contractor (or sole contractor)
Email address of the principal contractor (or sole contractor)
Date of appointment

under <u>Part 2A (dutyholders and competence) of these Regulations</u> .	Date of appointment
Signature of principal contractor (or sole contractor)	l confirm that I have fulfilled my duties as a principal designer (or sole designer) under <u>Part 2A (dutyholders and competence) of these Regulations</u> .
	Signature of principal designer (or sole designer)
**Name of principal contractor (or sole contractor)	Date
	**If more than one dutyholder appointment is made, details and confirmation is required by
Telephone number of the principal contractor (or sole contractor)	each principal contractor for sole contractory and each principal designer (or sole or lead de- signer) appointed by the client. Add additional contacts and statements as required.
Email address of the principal contractor (or sole contractor). Date of appointment	
l confirm that I have fulfilled my duties as a principal contractor (or sole contractor) under <u>Part 2A (dutyholders and competence) of these Regulations</u> .	
Signature of principal contractor (or sole contractor)	
Name of principal designer (or sole designer)	
Telephone number of the principal designer (or sole designer)	
l 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 (or sole designer)	
**Name of principal designer (or sole designer)	
Telephone number of the principal designer (or sole designer)	

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Email address of the principal designer (or sole designer)

I confirm that I have fulfilled my duties as a principal contractor (or sole contractor)





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