

# DECLARATION OF COMPLIANCE

The Building Act 1984, The Building Safety Act 2022, The Building Regulations 2010 (as amended)



## Notice of Completion

by a person carrying out building work (England) Building Regulations 2010 (as amended).

A person who is required by Regulation 12 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 Regulation 16 paragraph (4A) as set out below. Requirements of Duty Holders and their competence can be found in Part 2A of the Building Regulations 2010 (as amended).

|                            |  |
|----------------------------|--|
| <b>Application number:</b> |  |
| <b>Project Address:</b>    |  |

## CLIENT

|   |  |
|---|--|
| <b>Client Name:</b>                                   |  |
| <b>Address (if different to the project address):</b> |  |
| <b>Telephone Number:</b>                              |  |
| <b>Email Address:</b>                                 |  |

I/We, the client(s), confirm that the following statements (a and b) are correct:

- a. The building work is complete.
- b. To the best of my/our knowledge the work complies with all applicable requirements of the Building Regulations

|                |  |
|----------------|--|
| <b>Signed:</b> |  |
| <b>Name:</b>   |  |
| <b>Date:</b>   |  |

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## PRINCIPAL CONTRACTOR (or sole contractor)

|                                   |  |
|-----------------------------------|--|
| <b>Principal Contractor Name:</b> |  |
| <b>Address:</b>                   |  |
| <b>Telephone Number:</b>          |  |
| <b>Email Address:</b>             |  |
| <b>Date of appointment:</b>       |  |

I/We confirm (as the Principal Contractor) that I/ we have fulfilled my/our duties under Part 2A (Duty Holders competence) of the Building Regulations.

|                |  |
|----------------|--|
| <b>Signed:</b> |  |
| <b>Name:</b>   |  |
| <b>Date:</b>   |  |

## PRINCIPAL DESIGNER (or sole Designer)

|                                 |  |
|---------------------------------|--|
| <b>Principal designer Name:</b> |  |
| <b>Address:</b>                 |  |
| <b>Telephone Number:</b>        |  |
| <b>Email Address:</b>           |  |
| <b>Date of appointment:</b>     |  |

I/We confirm (as the Principal Designer) that I/ we have fulfilled my/our duties under Part 2A (Duty Holders competence) of the Building Regulations.

|                |  |
|----------------|--|
| <b>Signed:</b> |  |
| <b>Name:</b>   |  |
| <b>Date:</b>   |  |