**FORM-BC1-** **2 Application of Building Permit**

**Application of Building Permit**

Date: \_\_\_\_/\_\_\_\_\_/\_201\_

|  |  |  |
| --- | --- | --- |
| **1** | **Applicant** | |
|  | Name of Applicant: |  |
| Kind of Manufacturing: |  |
| Address: |  |
| Contact: | Tel No.:\_\_\_\_\_\_\_\_\_\_\_\_\_ E- address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **2** | **Building Information** | |
|  | Location / Lot No. TSEZ |  |
| Purpose of Construction: | □New Construction　□ Extension　□Renovation |
| Type of Structure: | □Reinforced Concrete　□Steel □Others |
| Storey: / Max Height: | storey / (m) |
| Site area (sqm): |  |
| Building area (sqm) |  |
| Floor area (sqm) | GF:\_\_\_\_\_\_\_\_\_\_\_ 1F: \_\_\_\_\_\_\_\_\_ 2F:\_\_\_\_\_\_\_\_\_\_  3F: \_\_\_\_\_\_\_\_\_\_ 4F: \_\_\_\_\_\_\_\_\_ 5F:\_\_\_\_\_\_\_\_\_**\_** |
| Total Floor Area (sqm) |  |
| Building Coverage Ratio (BCR) |  |
| Floor Area Ratio (FAR) |  |
| **3** | **Construction Schedule** | |
|  | Date of Commencement |  |
| Date of Completion |  |
| **4** | **Attached Documents and Drawings** | |
|  | * Architectural (Layout Plan, Finish Schedule, Floor Plans, Elevations, Sections) * Perspective view (3D) * Sewage Treatment Plant (if any) * Machinery Installation Plan or Production Flow Chart * Structural (Drawings, Calculation Report, Soil Investigation Report(if any)) * Other items   \_\_\_\_\_\_\_\_ \_  \_\_\_\_\_\_\_\_ \_  \_\_\_ | |

We hereby certify that above information is correct.

Licensed Architect / Engineer; Applicant;

Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 　 Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

OSSC record:

|  |  |  |
| --- | --- | --- |
| Received : \_\_\_\_ /\_\_\_\_\_/\_201\_  Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Checked :\_\_\_\_\_\_/\_\_\_\_\_\_/\_201\_  Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Approved : \_\_\_\_\_\_/\_\_\_\_\_/\_201\_  Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |