

Application For Building Registration



This application must be completed and returned to Foregale within 6 months of the product installation on site.

| | | | |
|---------------------|----|----|------|
| Date of Application | XX | XX | XXXX |
|---------------------|----|----|------|

Particulars of Building

| | |
|--------------------------|------------------------|
| Building Name | Building Owner |
| Building Address | Owner Address |
| | |
| Building Post Code | Owners Post Code |

Building Dates

| | |
|--------------------------------|-----------------------|
| Date Commenced | Date Completed |
| Floor Area | Height to Eaves |
| Intended use of building | |
| Distance to Shoreline | |

Local Environment

| | |
|----------------------------|---|
| Urban | X |
| Rural | X |
| Industrial low pollution | X |
| Industrial heavy pollution | X |

| |
|---|
| Contract/Order number (applicable to contractor) |
| |

Main Contractor

Cladding Contractor

| Roof/Wall | Profile | Colour | Coating | Quantity (MT2) |
|-----------|---------|--------|---------|----------------|
| | | | | |
| | | | | |
| | | | | |

| | |
|---------------------|--|
| Applicant Name | |
| Applicant Signature | |

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|---|
| Mill Coil Numbers used To be completed by Foregale |
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