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

**Building Regulations 2010 (as amended)**

A person who is required by [Regulation 12](https://www.legislation.gov.uk/uksi/2010/2214/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)](https://www.legislation.gov.uk/uksi/2010/2214/regulation/16) as set out below.

Requirements of dutyholders and their competence can be found in [Part 2A of the Building Regulations 2010 (as amended)](https://www.legislation.gov.uk/uksi/2010/2214/part/2A).

**The building work referred to in our building notice / application of building control approval with full plans is complete.**

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| **Application Number** |  |
| **Location of the Building Work** |  |
| **Description of works** |  |

***If more than one dutyholder appointment is made, details and confirmation is required by each principal contractor (or sole contractor) and each principal designer (or sole or lead designer) appointed by the client. Add additional contacts and statements as required.***

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| **Client Declaration**  I confirm that the building works are complete and to the best of my knowledge the work complies with all applicable requirements of the building regulations. | **Client Name:** |
| **Address:** |
| **Telephone:** |
| **Email:** |
| **Client Signature:** |
| **Declaration Date: dd/mm/yyyy** |

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| **Principle Designer (or sole or lead designer)** **Declaration** I confirm that I have fulfilled my duties as a principal designer (or sole or lead designer) under Part 2A (duty holders and competence) of these Regulations | **Principle Designer (or Sole or Lead Designer)** **Name:** |
| **Address:** |
| **Telephone:** |
| **Email:** |
| **Date appointed as Principal Designer (or Sole or Lead Designer): dd/mm/yyyy** |
| **Principle Designer (or Sole or Lead Designer) Signature:** |
| **Declaration Date: dd/mm/yyyy** |

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| **Principle Contractor (or sole contractor) Declaration** I confirm that I have fulfilled my duties as a principal contractor (or sole contractor) under Part 2A (duty holders and competence) of these Regulations | **Principal Contractor (or Sole Contractor) Name:** |
| **Address:** |
| **Telephone:** |
| **Email** |
| **Date appointed as Principal Contractor (or Sole Contractor):**  **dd/mm/yyyy** |
| **Principle Contractor (or Sole Contractor) Signature:** |
| **Declaration Date: dd/mm/yyyy** |