



Corporate Director  
Place & Communities  
Castle Point Borough Council,  
Council Offices, Kiln Road,  
Thundersley, Benfleet,  
Essex, SS7 1TF

www.castlepoint.gov.uk  
01268 882200  
buildingcontrol@castlepoint.gov.uk

**REVERSION  
APPLICATION**

Building Act 1984  
The Building Regulations 2010



<b>1</b>	<b>Applicant's details</b>
	Title:Mr/Mrs/Miss/Ms:                      Surname:                      Forenames:
	Address: _____
	_____ Postcode: _____
	Tel:                      Fax:                      Mobile:
	Email: _____
<b>2</b>	<b>Agent's details (if applicable)</b>
	Name: _____
	Address: _____
	_____ Postcode: _____
	Tel:                      Fax:                      Mobile:
Email: _____	
<b>3</b>	<b>Location of building to which work relates</b>
	Address: _____
	_____ Postcode: _____
<b>4</b>	<b>Work carried out</b>
	Description: _____
	_____
<b>5</b>	<b>Date of commencement of work:</b> _____
<b>6</b>	<b>Use or intended use of the building:</b>
	<b>Number of storeys:</b> _____
<b>7</b>	<b>Charges</b>
	<b>TOTAL PAYMENT</b> _____
	<b>Fees payable by phone at 01268 882200 Option 4</b>
	<b>Charges will be individually determined for each application, please contact Building Control.</b>
	<b>Please note that your application cannot be processed until payment is received</b>
<b>8</b>	<b>Statement</b>
	As the person who intends to carry out building work or make a material change of use, I give in accordance with regulation (12) (2) (a) or (12) (2) (b) as appropriate, of The Building Regulations 2010.
	Name:                      Signature:                      Date: