Theewaterskloof Municipality Head Office
6 Plein Street
P.O.Box 24
Caledon
7230
Telephone: +27 (28) 2143300
Fax: +27 (28) 2141289
Website: www.twk.org.za

BUILDING CONTROL SECTION

REQUEST FOR CERTIFICATE OF OCCUPANCY

Section A

I

Being

(State interest in the building i.e. owner, bond holder, etc)

Company Registration No (If Applicable)

Correspondance Address

Cell Number: WORK:

Email Address:

I/We hereby apply for a certificate of occupancy for the building located on

Erf No. Town/Suburb

Located At

Section B

The work has been completed in accordance with approved plan number

for which a final inspection has been done

Section C

I attach a certificate certifying that the installation is in accordance with the provisions of all the applicable laws.

- ☐ Electrical Installation
- ☐ Plumbing Certificate
- ☐ Glazing Certificate
- ☐ Gas Installation
- ☐ the Mechanical ventilation system(SANS 10400 form 04)
- ☐ Energy efficiency(SANS 10400 form 04)
- ☐ the Structural system(SANS 10400 form 04)
- ☐ Fire Protection system(SANS 10400 form 04)
- ☐ Fire installation system(SANS 10400 form 04)
- ☐ Other (specify)

have been erected/installed in accordance with the application in respect of which approval was granted in terms of Section 7 of the National Building Regulations and Building Standards Act, Act No 103 of 1977, was amended.

SIGNATURE: _____ **DATE:**_____

NOTE: This application shall be submitted at the time it is delivered to the Building Inspector

ADDRESS TO WHICH CERTIFICATE IS TO BE POSTED:

Postal Code: