

## FORM 80 - NOTIFICATION OF LOW RISK WORK (BUILDING OR PLUMBING) F

Regulation 32	Regu	lation	32
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To:		Adv	rmit Authority dress burb/postcode	Form <b>80</b>
Work details:				
Type of work: (X one applicable)	Building work	Plumbing work	Demolition	n work
Address:			]	Lot No:
			Building	g Class
The low risk work: (Description of the work e.g. new building, Category 2B plumbing work, etc) Note dimensions where appropriate See Determinations for dimension restrictions for low risk work.				
Cost of work done	\$			

Building Administration Fee amount (0.1%): \$

Construction Industry Training Levy amount (0.2%): \$

NOTE: All building or demolition work over \$20 000 is liable to pay a Building Administration Fee (BAF) and Construction Industry Training Levy to the relevant Permit Authority.

The BAF must be paid within 7 business days after the work is completed, the Industry Training Levy must be paid prior to the work commencing. Information about the Levy may be found here: www.tbcitb.com.au

## Plumber, Owner/and responsible person details:

Owner:	Contact person:
Contact address:	Phone No:
	Fax No:
Email address:	
Builder/ Plumber competent perso (delete one not applica	on:
Business name:	
Business addres	S: Phone No:
	Fax No:
Licence No:	Email address:

## For plumbing work only:

- As the licensed plumber who performed the work has certified that it complies with all • relevant Acts, the National Construction Code and other relevant codes and standards;
- As-constructed plans of the plumbing work are provided (for any below groundwork only) •
- A notification in respect of defective work discovered as part of the preparation, or • performance, of the low-risk plumbing work has already been notified to the council.

Form No: I&DS.BLD.030

Director of Building Control - date approved: 1 July 2017

PO Box 168, WYNYARD 7325 Email: council@warwyn.tas.gov.au

Building Act 2016 - Approved Form No 80

Notice details:				
The work detailed above was completed on:			Date	
Owner or Builder / Plumber / Competent Person	Name: [print]	Signed		Date
(Delete one(s) not applicable)				