

**MERTHYR TYDFIL COUNTY BOROUGH COUNCIL  
BUILDING CONTROL DEPARTMENT**

Unit 5, Triangle Business Park, Pentrebach, Merthyr Tydfil, CF48 4TQ

Email: [building.control@merthyr.gov.uk](mailto:building.control@merthyr.gov.uk)



Cyngor Bwrdeistref Sirol  
**MERTHYR TYDFIL**  
MERTHYR TYDFIL  
County Borough Council

**Information required by a person applying for a Regularisation Certificate for building work to be provided as far as is reasonably practicable (Wales) for non-higher-risk building work**

**Building Regulations 2010 (as amended)**

Where a building control authority receives an application in accordance [Regulation 18](#), they may require the applicant to take such reasonable steps as the authority think appropriate to ascertain what work, if any, is required to secure that the relevant requirements are met.

<b>Name of the client</b>	
<b>Address of the client</b>	
<b>Telephone number of the client</b>	
<b>Email address of the client (if available)</b>	

**I confirm that to the best of my knowledge the work complies with all applicable requirements of the Building Regulations.**

<b>Signature of client</b>	
<b>Date:</b>	

<b>Name of principal</b>	
<b>Address of principal</b>	
<b>Telephone number of the principal contractor (or</b>	
<b>Email address of the principal contractor (or</b>	
<b>Date of appointment</b>	

I confirm that I have fulfilled my duties as a principal contractor (or sole contractor) under [Part 2B \(dutyholders and competence\) of these Regulations](#)

<b>Signature of principal contractor (or sole contractor)</b>	
<b>Date:</b>	
<b>**Name of principal contractor (or sole contractor)</b>	
<b>Address of principal contractor (or sole contractor)</b>	
<b>Telephone number of the principal contractor (or sole contractor)</b>	
<b>Email address of the principal contractor (or sole contractor) (if available)</b>	
<b>Date of appointment</b>	

I confirm that I have fulfilled my duties as a principal contractor (or sole contractor) under [Part 2B \(dutyholders and competence\) of these Regulations](#)

<b>Signature of principal contractor (or sole contractor)</b>	
<b>Date:</b>	

<b>Name of principal designer (or sole designer)</b>	
<b>Address of principal designer (or sole designer)</b>	
<b>Telephone number of the principal designer (or sole designer)</b>	
<b>Email address of the principal designer (or sole designer)</b>	
<b>Date of appointment</b>	

I confirm that I have fulfilled my duties as a principal designer (or sole designer) under [Part 2B \(dutyholders and competence\) of these Regulations](#)

**Signature of principal designer (or sole designer)**

**Date:**

**\*\*Name of principal designer (or sole designer)**

**Address of principal designer (or sole designer)**

**Telephone number of the principal designer (or sole designer)**

**Email address of the principal designer (or sole designer)**

**Date of appointment**

I confirm that I have fulfilled my duties as a principal designer (or sole designer) under [Part 2B \(dutyholders and competence\) of these Regulations](#)

**Signature of principal designer (or sole designer)**

**Date:**

\*\*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.