

Form 8

REGULATION 114
Building Act 1993 (Act)
BUILDING REGULATIONS 2018

Level 3, 489 Toorak Road Toorak Victoria 3142 P: 03 9421 0421 E: office@bsgm.com.au

PROTECTION WORK RESPONSE NOTICE

10		
*Owner/*Owners Agent:		
Postal address:		
Suburb:	State:	Postcode:
Email:		
Address of owner's property on which building work is to be ca	rried out:	
Number:Street/Road:		
City/Suburb/Town:	Po	stcode:
Relevant Building Surveyor		
Name:		
Postal address:		
Suburb:	State:	Postcode:
From		
*Adjoining owner/*adjoining owner's agent:		
Postal address:		
Suburb:	State:	Postcode:
Contact Person:	Telephone:	
Email:	•	
Address of my adjoining property:		
Number:Street/Road:		
City/Suburb/Town:	Po	stcode:

Response from adjoining owner

In accordance with section 85 of the Building act 199 owner under section 84 of that Act and:	93, I am responding to the notice served on me by the
(a) agree to the proposed protection work	t
(b) Disagree with the proposed protection work	□†
(c) Request the following further information	□†
Signature	
Signature of *adjoining owner/*adjoining owner's age	ent:Date:
*Delete if inapplicable	

[†]Tick if applicable