

## CERNACH HOUSING ASSOCIATION LIMITED ALTERATIONS APPLICATION FORM

Address of prope	erty to be alte	ered.		
Full name(s) of t	enant(s)			
Details of propos Please provide for			ans, specification	ons, estimates e
Is planning perm	ission or a b	uilding warra	ant required for	the work?
Please circle	Yes	No		
If yes, provide co	pies of the a	ipproval.		
Signature(s)				
_				
Date				

## **OFFICE USE**

## **ALTERATIONS**

## **Pre Installation Inspection**

1	Is prior inspection necessary?	Yes / No
2	Can work proceed?	Yes / No
3	Comments	
		<u> </u>
4	Date tenant notified of outcome	
	Maintenance Officer's Signature	
	Date	
Pos	st Installation Inspection	
1	Work completion date	
2	Is work carried out to a satisfactory standard	Yes / No
3	Comments	_
		<u> </u>
	Maintenance Officer's Signature	
	Date	