

Notice of Completion by a person carrying out building work (England)

Building Regulations 2010 (as amended).

A person who is required by [Regulation 12](#) to give a building notice or an application for building control approval with full plans for carrying out building work shall, not more than five days after that work has been completed, give the local authority a notice which complies with [Regulation 16 paragraph \(4A\)](#) as set out below. Requirements of dutyholders and their competence can be found in [Part 2A of the Building Regulations 2010 \(as amended\)](#).

The building work referred to in our building notice / application of building control approval with full plans* is complete (notice/application form attached to this notice). **delete as appropriate.*

Name of the client	
Address of the client	
Telephone number of the client	
Email address of the client if available	

I confirm that to the best of my knowledge the work complies with all applicable requirements of the building regulations.

Signature of client

Date

Notice of Completion

Name of principal contractor (or sole contractor)	
Address of principal contractor (or sole contractor)	
Telephone number of the principal contractor (or sole contractor)	
Email address of the principal contractor (or sole contractor)	
Date of appointment	

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

Signature of principal contractor (or sole contractor)

Date

** Name of principal contractor (or sole contractor)	
Address of principal contractor (or sole contractor)	
Telephone number of the principal contractor (or sole contractor)	
Email address of the principal contractor (or sole contractor)	
Date of appointment	

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

Signature of principal contractor (or sole contractor)

Date

Notice of Completion

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

I confirm that I have fulfilled my duties as a principal contractor (or sole contractor) under [Part 2A \(dutyholders and competence\) 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 contractor (or sole contractor) under [Part 2A \(dutyholders and competence\) 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.