

SLIGO COUNTY COUNCIL

COMHAIRLE CHONTAE SHLIGIGH

NOTIFICATION FORM EXEMPTED DEVELOPMENT - ARTICLE 10(6) CHANGE OF USE EXEMPTION

Name of Relevant Planning Authority:		_
Name of Notifier/Property Owner:		
Name of Person/Agent Acting on behalf of Notifier/Property Owner (if any):		
[Note: Contact Details to be supplied at the end of this form]		
Notification of intention to avail of exempted de Development Regulations 2001, as inserted by A Regulations 2018, at least two weeks prior to the c works.	rticle 2 of the Planning and Develo	opment (Amendment) (No. 2)
Notification Details Required:		
Location of structure	Full Postal Address	
	Eircode	
Total number of Residential Unit(s)	number – e.g. 5	
Total Residential Floorspace (m ²)	number – e.g. 642	
	Number of bedrooms	Floorspace of unit (m²)
Residential Unit 1	number – e.g. 2	number – e.g. 84
Residential Unit 2		
Residential Unit 3		
Residential Unit 4		
Residential Unit 5		
Residential Unit 6		
Residential Unit 7		
Residential Unit 8		
Residential Unit 9		
Date works will commence (Minimum of two weeks subsequent to	date of notification)	dd/mm/yyyy
Signed (Notifier/ Agent as appropriate):		Date:

CONTACT DETAILS — NOT TO BE PUBLISHED

Notifier/Property Owner
Address:
Eircode:
Telephone number:
Mobile number:
E-mail address:
Person/agent (if any) acting on behalf of the Notifier/Property Owner
Person/agent (if any) acting on behalf of the Notifier/Property Owner Address:
Address:Eircode:
Address:
Address:
Address: Eircode: Telephone number: