

MUNICIPAL CORPORATION AMBALA

Building Plan

1. Name: _____
2. Property ID: _____
3. Ward Number: _____
4. Address: _____
5. Area/Colony: _____
6. Mobile No: _____
7. Email id (if any): _____
8. Application Proposed for
 - a. New
 - b. Alteration/Additions
 - c. Alteration and Addition (Incremental)
 - d. Demolition & Reconstruction
 - e. Subdivision
9. Building Category
 - a. Ordinary Building
 - b. Special Building
10. Land Use Zone
 - a. Continuous Building Area
 - b. Detached Area
 - c. EWS Area
11. Type of Proposal
 - a. Residential
 - b. Industrial
 - c. Educational
 - d. Commercial / Departmental Stores
 - e. Assenbly / Religious / Welfare
 - f. Residential /Commercial Mixed
 - g. Institutional
 - h. Petrol Pump
 - i. Recreational
 - j. Community

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- k. Health Purpose (Hospital / Clinic etc.)
- l. Religious
- m. Transport Depot / Bus Terminus / Railway Station
- n. Cottage Industries
- o. Government and Semi Government offices, Banks
- p. Public Utility Building

12. Use Zone

- a. Primary Residential
- b. Mixed Residential
- c. Institutional
- d. Open Space and Recreational
- e. Commercial
- f. Economically weaker section area
- g. Industrial
- h. Non Urban Use Zone
- i. Special Industrial and Hazardous
- j. Agriculture

13. Documents Required:-

- a. Form Of Application BR-I, BR-II, BR-III made by Architect:
- b. Affidavit from applicant (Attested By Notary)
- c. Authority letter of architect
- d. Labour cess form/Construction Cost Certificate (Performa for the calculation of cess under the building AND other constructions workers welfare)
- e. Copy of registry notary attested
- f. Master of building plan (made by architect) Tracing Sheet
- g. Two copies of building plan (Blue Print)
- h. Certified copy of structure plan (made by architect/Structure Engineer in case of commercial)
- i. NOC required From Fire Department (in Case of Commercial)
- j. Site On National Highway/Schedule Road NOC required (In Case of Both commercial And residential)

IT is certified that the above information is correct to the best of my Knowledge.

(Authorized signature & Seal Date)