



# HØRSENS KOMMUNE

Received, date

Name and address of the Municipality		To be filled in by the Municipality				
Horsens Kommune Rådhusstorvet 4 8700 Horsens		Property Number	Buil. no	Street code	House no.	B Storey
		L/R door no.	Apartment no.		Building reg. no.	
		Building Regulations (BR15)				
		<input type="checkbox"/> Application for a Building Permit <input type="checkbox"/> Notification of building works				

### The Property

See guidelines

Street name and house number (identification of location)) <i>Sundgårdsvej 95</i>
Cadastral appellation

### Type of construction

<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Extension	<input type="checkbox"/> Other construction
Specify what you want to construct (for example single family house, semi detached house, garage, shop, workshop, demolition of existing building, moving partition walls, change of usage, putting up signs, adding sunblinds, wind mills, farm buildings)		
<i>Single Family House : Two storey with a basement</i>		
<input type="checkbox"/> The construction works do not require a dispensation <input type="checkbox"/> The construction works require a dispensation (A reasoned application shall be annexed to this application)) <input type="checkbox"/> Necessary appendices must be annexed (see guidelines)		

### Construction Insurance

<input checked="" type="checkbox"/> Documentation from Insurance broker confirming liability enclosed. (Only applies to buildings meant for habitation)
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Method of heating	<input type="checkbox"/> District heating	<input type="checkbox"/> Electricity	<input type="checkbox"/> Other	In case 'Other' state method
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### Applicant (architect, engineer or the like)

Name, address, telephone number and Company registration number	E-mail
<i>BHAWNA MAUK DIMITRIAN CEBO TARU REMIGIJUS PEIKUS</i>	
Date and signature	<i>03-07-2023</i>
<i>Bhawna</i>	<i>Cebotar</i>

### Owner of property according to Land Registry

### Owners association

The signature of the chairman of the owners association is required unless the applicant by other means can verify his/her authority to apply on behalf of the owner	
Name, address, telephone number and Company registration number	Name of owners association, name of chairman, address and e-mail.
<i>John &amp; Jane 8100 Horsens</i>	
Date and signature	Date and signature