COUNTY GOVERNMENT OF NYERI

WHEN REPLYING PLEASE QUOTE OUR REFERENCE NO AND DATE.

P.O. BOX 1112-10100, NYERI
Telephone 061 2030700
Fax No. 061 2030537
Email: lands@nyeri.go.ke

DEPARTMENT OF LANDS, PHYSICAL PLANNING AND URBAN DEVELOPMENT.

FORM PLUPA/DC/1B **(r. 3(1))**

THE PHYSICAL AND LAND USE PLANNING ACT (No. 13 of 2019)

Registered Number of Application …….

APPLICATION FOR DEVELOPMENT PERMISSION (BUILDING PLAN)

TO……
……
… ……
……
……

(Insert Name and address of the appropriate County Government Office)

From…….

Reg Architect(s) No……..

E-mail……

Mobile No……..

P.O. Box……

Having duly been appointed as the Project Architect(s), I/We submit herewith Building Plans and particulars in a manner prescribed in the Physical and Land Use Planning Act that requires a Licensed Architect submits in accordance to Section 59 of the Act.

Description of Project:

(i) Location details

(a) Municipality ……

(b) Sub County ……

(c) Ward ……

(d) Name of Nearest Road/Street: ……

(e) Name of Area/Estate: ……

(ii) Plot L/R No.....

(iii) Plot Size.....

(iv) Land Tenure:-(Tick Appropriate Box)

(a) Freehold ☐

(b) Leasehold ☐

(c) Registered community land ☐

(d) Share Certificate ☐

(Share certificate to be accompanied by):

(i) Sworn Affidavit

(ii) Approved Sub Division

(iii) Beacon Certificate

(v) Conformity of building with approved land use and zoning regulations

(a) Current Land Use…….....

(b) Zone……

(c) Permitted Ground Coverage (%) ….....…….……

(d) Permitted Plot Ratio (No)….....

(e) Class of Building (tick √where applicable)

Residential:

Single Dwelling	☐	Details: .....
Multiple Dwelling	☐	Details: .....
Industrial	☐	Details: .....
Institutional	☐	Details: .....
Commercial	☐	Details: .....
Comprehensive	☐	Details: .....
Other (Specify)	☐	Details: .....

(f) Water supply by.....

(g) Method of Sewerage Disposal.....

(vi) (a) Number of dwellings/units with separate occupation.....

.....

(vii) Plinth Areas; (For fees calculations only) must include porches, veranda, balconies, garages, swimming pools etc.

Development Level	*Existing M²*	*New M²*
Basement/s		
Ground Floor/s/		
Mezzanine Floor/s		
1st Floor		
2nd Floor		
3rd Floor		
4th Floor		
Others		
Total (Submissions)		

8. Estimated Cost of the Project.....

9. Construction Materials of Approved Standard and Specifications:

(a) Foundation……..

(b) External walls……...

(c) Mortar……...

(d) Roof cover.....

(e) Damp proof course.....

(f) Finishes.....

10. In the event of the accompanying plans being required to be amended in any way in order that they may be approved by the County Government, I/We agree that for the purpose of Section 126(c) of the Public Health Act (Cap. 242) that the date of deposit shall be the date on which plans are re-deposited with the County after amendments have been satisfactorily made.

COUNTY GOVERNMENT OF NYERI

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DEPARTMENT OF LANDS, PHYSICAL PLANNING AND URBAN DEVELOPMENT.

FORM PLUPA/DC/1C **(r. 3(1))**

THE PHYSICAL AND LAND USE PLANNING ACT

(*No.* 13 *of* 2019).

APPLICATION FOR DEVELOPMENT PERMISSION (STRUCTURAL/CIVIL ENGINEERING DRAWINGS).

Registered Number of Application ……

Appendix B: Standard Certification by The Qualified Person for Structural Works.

1. In accordance with Regulation 9 of The Building Control Regulations, I, ……., the Qualified Person for structural works appointed under section 8(1)(a) or 11(1)(d)(i) of the Building Control Act., hereby submit the detailed structural plans and design calculations prepared by me and certify that they have been prepared in accordance with the provisions of the Building Control Regulations, the Building Control Act and any other written law pertaining to buildings and construction for the time being in force.

2. I further certify that these detailed structural plans and design calculations are in reference to Project Ref. No: ……

3. Total number of structural plans submitted: …….and total number of pages of design calculations in this book: ……..

…….

…….

Qualified Person for Structural Works ***Date***

Signature and Stamp

I hereby indemnify (*having duly completed The Indemnity Form PLUPA/DC/….*) the County Government of ……. from any claims that might arise during building construction or as a result of building collapse or loss of life.