



**Waterford City and County Council,  
Planning Department, Menapia Building, The Mall, Waterford.**

Telephone : 0761 102020

Fax : 0761 099701

Email:planning@waterfordcouncil.ie

**Complaint of unauthorised development**

Please print in BLOCK CAPITALS (Essential information\*)

<b>Site Location</b>	
Full address of subject site*	
Nature of subject site (i.e.building/site/field/private residence/etc)	
Please ensure that you comply with the following:	
- Attach an accurate location map of site*	
- Outline the site boundaries in colour*	
- Submit photograph(s) if available	
<b>Developer(s) details</b>	
Name(s)*	
Address(es)*	
<b>Detailed description of the development/activity*</b>	
If the development relates to a structure, please provide details of:-	
- Approximate height (metres)	
- Approximate floor area (metres <sup>2</sup> )	
- Any other relevant information	
Date and time of commencement of the development/activity (or when first	

noticed)	
Has the development/activity taken place at specific times? If yes, please give details	
<b>Site owner(s)</b>	
Name(s)*	
Address(es)*	
Have you established whether or not the development is <b>exempted development</b> ?*  (Refer to Council website at <a href="http://www.waterfordcouncil.ie/en/service/s/planning/fags/exempteddevelopment/">http://www.waterfordcouncil.ie/en/service/s/planning/fags/exempteddevelopment/</a> for details of commonly constructed exempted developments)	Yes <input type="checkbox"/> No <input type="checkbox"/>
Have you carried out a planning search on the site to check if the development is the subject of a <b>planning permission</b> ?*  (This can be done on line at <a href="http://www.waterfordcouncil.ie">www.waterfordcouncil.ie</a> using Gplan or by visiting the Planning Office, Menapia Building, The Mall, Waterford – Open 9.30am to 1 pm and 2 pm to 4 pm Mon – Fri	Yes <input type="checkbox"/> No <input type="checkbox"/>
Please give planning application reference number of any planning application(s) on site	
<b>Your details</b>	
Name*	
Address*	
Phone number*	
Email address	
Do you want your identity withheld*	Yes <input type="checkbox"/> No <input type="checkbox"/>

- The above information is correct to the best of my knowledge at the date of this complaint.
- If requested, I am prepared to swear an affidavit, and/or attend at court, to give evidence pursuant to this complaint.

Signed\*: \_\_\_\_\_

Date\*: \_\_\_\_\_

You should note that your complaint will not be treated as valid until all the above essential information has been provided and you have signed this complaint form. Your identity can be withheld if requested subject to compliance with the Freedom of Information Act 1997.