



**MUNICIPAL COUNCIL OF BEAU-BASSIN/ROSE-HILL**  
**BUILDING AND LAND USE PERMIT APPLICATION FORM**

Fill in this form to apply for a Building and Land use Permit for the excision of 1 lot from a larger plot of land or subdivision of land among heirs

<b>Official Use</b>
Name: .....
REF..NO. MORC /...../...../
Date of Application.....
Effective Date:.....
Due Date : .....

<b>Application Form</b>
<b>BLP 2</b>

**The BLP GUIDE**

The BLP Guide tells you how to fill in this form and about the plans and other documents that you must provide with this application. Ask us for a copy and read it before filling in the application form or read it online on our website <https://bbrh.org>

**List of information, particulars and documents to be submitted (*where applicable*)**

**(1) SUBMIT 4 SETS OF PLANS INCLUDING**

LOCATION PLAN (with distances from prominent landmarks)
SURVEY PLAN

**2) DOCUMENTS TO BE SUBMITTED**

COPY OF TITLE DEED
COPY NIC OF OWNER
COPY NIC OF REPRESENTATIVE
<b>IF YOU ARE NOT THE OWNER - CONSENT OR PROCURATION OF OWNER</b>
COPY OF AFFIDAVIT
CONSENT LETTER AND COPY OF NIC OF HEIRS
CONSENT LETTER AND COPY OF NIC OF USUFRUCT HOLDER

**3) CLEARANCES TO BE SUBMITTED**

ROAD DEVELOPMENT AUTHORITY CLEARANCE IF SITE IS SITUATED ALONG MOTORWAY A OR B ROAD
URBAN TRANSPORT PROGRAMME SECRETARIAT CLEARANCE(Where land is along ex-railway track)
FORESTRY CLEARANCE IF SITE IS ALONG MOUNTAIN OR RIVER RESERVE
LAND CONVERSION PERMIT/ NOTARY CERTIFICATE/ATTESTATION OR AFFIDAVIT FOR EXEMPTION FROM LAND CONVERSION
CONTOUR PLAN (where land is slopy)

# BLP 2 APPLICATION FORM

## PART A: Application & Site Details

### 1. Applicant's Name Address and Contact Details

Title Mr.  Mrs.  Miss.  Hrs.

Surname (or company) .....  
.....

First Name.....

ID No.....

*We will post any correspondence  
to this address*

Postal address.....  
.....  
.....

Phone (Office)..... (Home).....

Fax..... (Mobile).....

Email.....

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### 2. Where is your site located?

Location.....  
.....

Extent.....

TV No. ....

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### 3. Are you the owner of the site?

YES  NO

If NO,  
Name(s) of owner(s) .....

.....

Signature of owner(s).....

ID No. of owner(s) ..... Date.....

If you are signing on the owner's behalf as their legal  
representative, please state your legal authority under and attach  
documentary evidence (e.g. Power of Attorney, written consent)  
Attach separate sheet if space is insufficient.

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### 4. Description of proposed development

.....  
.....  
.....  
.....  
.....  
.....

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5. Present use of the site .....

**6. Do you require a Land Conversion Permit?**

YES  NO

If YES, has a LCP been submitted?

YES  NO

Note: The SIE Act provides for exemption from land conversion for those owning up to 10 arpents of land and you need to submit a notary attestation or a sworn affidavit to benefit.

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**7. Your declaration**

*If applicant is a company or association, the form must be signed by a director or authorized person under common seal.*

I apply for consent to carry out the development described in this application. I declare that all the information given is true and correct to the best of my knowledge, I also understand that:

- (a) an effective date will be given to my application if all plans and documents specified in the technical checklist accompanying this form have been submitted or if incomplete, the Council will request me to submit the missing documents within 8 days of the application

Signature:..... Date:.....

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**8. Declaration by applicant relating to service providers, e.g. / Architect/ Town Planner/ Draughtsman/ Sworn Land Surveyor and Engineer**

I / we hereby declare that the following agents/companies have prepared the plans submitted by me/us.

Name of Surveyor/Town Planner \_\_\_\_\_  
Draughtsman : \_\_\_\_\_  
Engineer: \_\_\_\_\_

**Vat registration no. if applicable: .....**

**Phone No. of Service Provider: .....**

**Signature of applicant.....**

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**PART B: SCHEDULE OF FEES PAYABLE ON ISSUE OF PERMIT**

- Excision/Subdivision of land among heirs – Rs 500/lot

Number of lots: .....

Total Fees: Rs .....

I hereby certify that the above is correct

.....  
Signature of Service Provider

.....  
Date