

CONSTRUCTION CERTIFICATE APPLICATION



Suite 2, Level 2, 2 Rowe St,
Eastwood NSW 2122
P:(02) 9191 0400
F:(02) 9191 0401
E: admin@certified.net.au

1. Application Details

Please note that the applicant cannot be the builder unless the builder is the owner of the property.	Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other
	Surname (or Company):
	Given names (or ABN):
	Address:
	State: Post Code:
	Phone: Fax:
	Mobile:
	Email:

2. Subject Property Identification

	Address:
	State: Post Code:
	Lot: DP/SP
	Council Area:

3. Owners Details

	Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other
	Surname (or Company):
	Given names (or ABN):
	Address:
	State: Post Code:
	Phone: Fax:
	Mobile:
	Email:

	<ul style="list-style-type: none"> • I/We understand that if the information is incomplete the application may be delayed or rejected or more information may be requested. • I/We acknowledge that if the information provided is misleading any Construction Certificate approval granted may be void • I/We understand that building works cannot commence until 2 days after the appointment of PCA and it is my/our responsibility to arrange all mandatory critical stage inspections via prior written notice. • I/We understand that if a mandatory critical stage inspection is missed or if we do not construct the building in accordance with the Construction Certificate approval, the PCA will be unable to issue an Occupation Certificate. • I/We have completed the application checklist and schedules 1,2 and 3 and acknowledge that the Construction Certificate application is incomplete until all documentation is submitted. • I/We hereby appoint Steven Saad of Certified Building Specialists as the Principal Certifying Authority (PCA) for the building works identified in this application. (Select this item only if you wish to appoint a PCA) <p>In signing this application form I/We declare the abovementioned terms and conditions.</p>
	Signed (Applicant):
	Date:
10. Owners Consent	
<p>Owner to declare items and sign declaration. If applicant is a company or strata title body corporate, a director or authorised delegate must sign this declaration</p>	<p>Declaration:</p> <ul style="list-style-type: none"> • I/We authorise the right of entry into the subject property to conduct inspections of building works forming part of the scope of this Construction Certificate • As owners of the property the subject of this Construction Certificate application, I/We hereby consent to this application. <p>In signing this application form I/We declare the abovementioned terms and conditions.</p>
	Signed (Owner(s)):
	Date:

Schedule 1. Application for a Construction Certificate

Please complete this schedule. The information will be sent to the Australian Bureau of Statistics.

All new buildings	Please complete the following:							
	Number of Storeys (including underground floors)							
	Gross floor area of new building (m ²)							
	Gross site area (m ²)							
Materials - Residential buildings	Please indicate the materials to be used in the construction of the new building(s):							
	Walls	Code	Roof	Code	Floor	Code	Frame	Code
	Brick (double)	<input type="checkbox"/> 11	Tiles	<input type="checkbox"/> 10	Concrete or slate	<input type="checkbox"/> 20	Timber	<input type="checkbox"/> 40
	Brick (vener)	<input type="checkbox"/> 12	Concrete or Slate	<input type="checkbox"/> 20	Timber	<input type="checkbox"/> 40	Steel	<input type="checkbox"/> 60
	Concrete or stone	<input type="checkbox"/> 20	Fibre Cement	<input type="checkbox"/> 30	Other	<input type="checkbox"/> 80	Aluminium	<input type="checkbox"/> 70
	Fibre cement	<input type="checkbox"/> 30	Steel	<input type="checkbox"/> 60	Not Specified	<input type="checkbox"/> 90	Other	<input type="checkbox"/> 80
	Timber	<input type="checkbox"/> 40	Aluminium	<input type="checkbox"/> 20			Not Specified	<input type="checkbox"/> 90
	Other	<input type="checkbox"/> 20	Other	<input type="checkbox"/> 20				
	Curtain Glass	<input type="checkbox"/> 50	Not specified	<input type="checkbox"/> 20				
	Steel	<input type="checkbox"/> 60						
	Aluminium	<input type="checkbox"/> 70						
	Other	<input type="checkbox"/> 80						
Not specified	<input type="checkbox"/> 90							

Schedule 2. Existing and Proposed Fire Safety Measures

Please complete this schedule by identifying the existing and proposed fire safety measures within the subject development placing a tick in the appropriate box. Only proposed measures are required for a new development.

Essential Fire Safety Measure	Existing	Proposed
Access Panels, Doors & Hoppers To Fire Resisting Shafts		
Automatic Fail Safe Devices		
Automatic Fire Detection & Alarm		
Automatic Fire Suppression Systems		
Combined Fire Hydrant & Sprinkler System		
Emergency Lifts		
Emergency Lighting		
Exit Signs		
Fire Alarm Monitoring Communication Link		
Fire Control Centres & Rooms		
Fire Dampers		
Fire Doors		
Fire Hose Reel Systems		
Fire Hydrant Systems		
Fire Rated Lift Landing Doors		
Fire Seals - Electrical		
Fire Seals - Plumbing		
Fire Shutters - Carpark		

Fire Shutters – External Openings		
Fire Windows		
Floor & Wall Covering		
Lightweight Construction		
Mechanical Air Handling Systems:		
• Exit Pressurization		
• Zone Smoke Control		
• Smoke Exhaust System		
• Automatic Shutdown		
• Car Park Ventilation System		
Paths Of Travel		
Perimeter Emergency Vehicle Access		
Portable Fire Extinguishers		
Radiant Heat Attenuation Screens		
Safety Curtain In Proscenium Opening		
Sliding Fire Doors		
Smoke Doors		
Smoke & Heat Vents		
Smoke Dampers		
Smoke And Heat Alarms		
Smoke Seals		
Solid Core Doors		
Sound System And Intercom System For Emergency Purposes		
Standby Power Systems		
Wall-Wetting Drenchers –External Openings		
Wall-Wetting Drenchers – Fire Shutter		
Warning & Operational Signs		
Performance Based Alternative Solution Report		

NOTICE OF COMMENCEMENT AND OF PRINCIPAL CERTIFYING AUTHORITY



Suite 2, Level 2, 2 Rowe St,
Eastwood NSW 2122
P:(02) 9191 0400
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E: admin@certified.net.au

1. Details of Applicant

Please note that the applicant cannot be the builder unless the builder is the owner of the property.	Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other
	Applicant's name:
	Address:
	State: Post Code:
	Phone: Fax:
	Mobile:
	Email:

2. Subject Property Identification

	Address:
	State: Post Code:
	Lot: DP/SP
	Council Area:

3. Description of Works

Provide a description of the works to be approved as per the Development Consent	Describe works as per the Development Consent:

4. Development Consent

	Development Consent No.
	Date of determination:
	Approval Authority:

5. Construction Certificate	
	Construction Certificate No.
	Date of determination:
6. Appointment of Principal Certifying Authority	
	Certifying Authority: Steven Saad for Certified Building Specialists
	Accreditation Body: Building Professionals Board
	Phone: (02) 9191 0400 Fax: (02) 9191 0401
	Email: steven@certified.net.au
	Address: Suite 2, Level 2, 2 Rowe St, Eastwood NSW 2122
7. Compliance with Conditions	
	Have all conditions required to be satisfied prior to the commencement of work been satisfied? Yes <input type="checkbox"/> No <input type="checkbox"/>
8. Principal Contractor Details	
Provide details of Principal Contractor of development (required for all projects)	Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other
	Name:
	Company:
	Address:
	State: Post Code:
	Phone: Fax:
	Email:
	Licence Number (Mandatory) :
9. Date of Commencement	
Commencement Date	Date that works are to commence on:

10. Principal Certifiers Declaration

To be completed and signed by PCA	Declaration: <ul style="list-style-type: none">• Certified Building Specialists acknowledge that they have been appointed by the applicant to carry out the role of the Principal Certifying Authority for this development.• Certified Building Specialists acknowledge that they have seen evidence that the builder is licensed and insured.
	Signed: Name: (on behalf of Certified Building Specialists)
	Date:

11. Applicant's Declaration

The applicant must sign this notice	Signed Applicant(s): Name:
	Date:

Privacy Policy

The information you provide in this notice is required under the Environmental Planning and Assessment Act 1979 if you are going to erect a building or carry out subdivision work. If you do not provide the information to the consent authority, you cannot commence the work. The information will be held by the consent authority and by the council (if the council is not the consent authority). Please contact the council if the information you have provided in this notice is incorrect or changes.

OCCUPATION CERTIFICATE APPLICATION



Suite 2, Level 2, 2 Rowe St,
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1. Occupation Certificate Type

Type of Occupation
Certificate

Interim (IOC)

Final (OC)

2. Application Details

Please note that the applicant **cannot** be the builder unless the builder is the owner of the property.

Mr Mrs Miss Ms Other

Surname (or Company):

Given names (or ABN):

Address:

State:

Post Code:

Phone:

Fax:

Mobile:

Email:

3. Subject Property Identification

Address:

State:

Post Code:

Lot:

DP/SP

Council Area:

4. Description of Development

Provide a description of the works to be approved as per the Development Consent

Describe Entire Project as per the Development Consent:

Is the OC for Whole or Part of the Development:

If Part Describe:

5. Building Classification

Tick the relevant class	BCA Classification: 1a 1b 2 3 4 5 6 7a 7b 8 9a 9b 9c 10a 10b 10c
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6. Development Consent

	Development Consent No.
	Date of determination:
	Approval Authority:

7. Construction Certificate

	Construction Certificate No.
	Date of determination:

8. Applicant Declaration

Applicant to declare items and sign declaration.	Declaration: <ul style="list-style-type: none"> I/We declare that all the information in this application is, to the best of my knowledge, true and accurate. I/We also understand that if the information is incomplete the application may be delayed or rejected or more information may be requested. I/We acknowledge that if the information is misleading, any approval granted may be void. In signing this application form, I/We declare the abovementioned terms and conditions.
	Signed (Applicant):
	Date: