

PRIVATE BUILDING CERTIFIERS

APPLICATION FORM/ APPOINTMENT OF PRINCIPAL CERTIFYING AUTHORITY/ NOTICE OF COMMENCEMENT

Environmental Planning and Assessment Act 1979 Sections Clause 84A & 109C of EP&A Regulation 2000

1. Application Sought

- | | |
|---|--|
| <input checked="" type="checkbox"/> Construction Certificate | Office use only
Date of Receipt 25/9/14 |
| <input type="checkbox"/> Complying Development Certificate | Date of Receipt / / |
| <input type="checkbox"/> Occupation Certificate – Interim/ Final | Date of Receipt / / |
| <input checked="" type="checkbox"/> To appoint Cheyne James from Private Building Certifiers Pty Ltd as the Principal Certifying Authority. | |

2. Applicant's Details

Name MATTHEW STEVENS

Address 2 HOWELL CLOSE

Suburb or town NEWPORT State NSW Postcode 2106

Telephone _____ Fax _____ Mobile 0416 570 067

Email Peak1969@hotmail.com


Note: The applicant must be the property owner or a person authorised by the owner to lodge the application. However a building contractor cannot be the applicant unless they are the owner of the property.

3. Owner Consent

Name MATTHEW STEVENS

Address 2 HOWELL CLOSE NEWPORT NSW 2106

As the owner/owner agent of the subject property, I/we hereby consent to this Application of this certificate for the proposed building works described in this application.

Signature  Date 25 SEP 14

4. Subject Property

Unit/Street no. 2 Street Name HOWELL CLOSE

Suburb or town NEWPORT State NSW Postcode 2106

Lot/ Portion 2 Section _____ DP No 229781



5. Description of the Building Work

secondary dwelling, deck, extension of garage
and driveway

Building Code of Australia Classification/Use

1a

Estimated Cost of Work

\$

82000.00

including GST

6. Builder/Principal Contractor

Name

IAN CAMPBELL

Address

PO Box 1083 MONA VACE NSW 1660

Telephone

0424 549 066

License No/OB Permit No

136273C

7. Development Consent & Certificate

Development Consent No

N0242/14

Date of Determination

17 SEP 14

Construction Certificate/Complying Development Certificate No

14/2929-1

Date of Determination

17.10.14

8. Compliance with Conditions of Consent & Date of Commencement

Have all conditions of the Development Consent/Complying Development Certificate been satisfied?

☒ Yes

☐ No

Have the requirements under the Home Building Act 1989 been satisfied?

☒ Yes

☐ No

Date Work is to Commence:

Two (2) days from the lodgment of this form with the Consent Authority

9. Appointment of the Principal Certifying Authority

Name

Chayne James

Accreditation No

1269

Address

Suite 2501, 4 Daydream St, Warriewood NSW 2102

Telephone

9999 6490

Email

chayne@residentialcertifiers.com.au

I accept the appointment as Principal Certifying Authority for the above development.

Signature



Date

17.10.14

