

16 December 2010

The General Manager  
Pittwater Council  
PO Box 882  
MONA VALE NSW 1660

**Attention Customer Services**

Dear Sir/Madam,

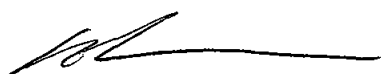
**BARRENJOEY MONTESSORI SCHOOL  
MODULAR CLASSROOM FACILITIES 2B TASMAN RD, AVALON  
OCCUPATION CERTIFICATE**

Please find enclosed the following documents for the above project

- 1 Copy of Final Occupation Certificate No CF09401OC01 issued by Advance Building Approvals in accordance with Part 4A of the Environmental Planning and Assessment Act 1979
- 2 Copies of other supporting documents and certifications,
- 3 Copy of Mandatory Critical Stage Inspection Report
- 4 Cheque for \$30 00 being certificate registration fee

Please contact the undersigned for any enquiries

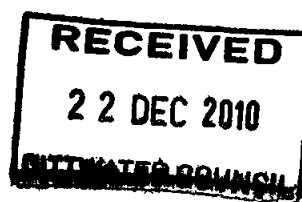
Yours sincerely  
**FOR ADVANCE BUILDING APPROVALS PTY LTD**



**SAEID ASKARIAN**  
Director

\$30 REC' 294458 20/12/10

CF09401 LT 161210 OC02 Pittwater SA



**advance**  
BUILDING APPROVALS  
Advance Building Approvals Pty Ltd  
ABN 93 096 551 816  
Suite 1004 370 Pitt St Sydney NSW 2000  
PO Box A1123 Sydney South NSW 1235  
E aba@advanceba.com.au  
T (02) 9283 6299 (02) 9262 9726  
F (02) 9283 6252



Suite 1004 370 Pitt Street  
Sydney NSW 2000  
Tel 9283 6299 Fax 9283 6252

# Occupation Certificate

CC no CF09401CC01

This certificate is issued by a certifying authority (a council or a private certifier) and allows the applicant to occupy or use the building or part of the building as set out in the certificate

## 1. Details of the applicant

Mr ☐ Ms ☐ Mrs ☐ Dr ☐ Other ☐ Company ☐

Name of Applicant (company or individual)

Barrenjoey Montessori School

Name of contact person (if Applicant is a company)

Glynis Lance

Flat/Level

Street number, street name

2 Tasman Road

Suburb or town

Avalon

State

NSW

Postcode

2107

Daytime telephone

02 9973 1422

Fax

02 8102 2308

Mobile

Email

toby@apb.com.au

## 2. Details of the building

Flat/Level

Street number, street name

2B Tasman Road

Suburb or town

Avalon

Postcode

2107

Description of the building work

Modular classroom facilities

Lot no

Section

DP/MPS no

Volume/folio

Development application or complying development certificate no

DA 380/09 (Pittwater Council)

## 3. Decision of the certifying authority

Type of certificate issued

- ☐ an interim occupation certificate  
☒ a final occupation certificate

Date of this decision

16 December 2010

## 4. Information attached to this decision

- ☒ A schedule of fire safety measures  
☒ The fire safety certificate for new/modified essential fire safety measures

**5. Final occupation certificate**

Saeid Askarian (For Advance Building Approvals Pty Ltd)

certifies that

- ☐ the health and safety of the occupants of the building have been taken into consideration
- ☒ a current development consent has been granted for the development
- ☐ a current complying development certificate has been issued for the development
- ☒ a current construction certificate has been issued with respect to the plans and specifications for the building
- ☒ the building is suitable for occupation or use in accordance with its classification under the Building Code of Australia as a class  building
- ☒ a final fire safety certificate has been issued for the building
- ☐ a report from the Commissioner of Fire Brigades has been considered

**NOTE** In preparation of this Occupation Certificate we have relied upon design, installation and inspection certificates from relevant consultants/contractors, as appropriate

Occupation certificate no

CF09401OC01

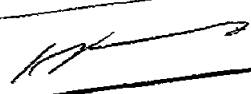
Date of the certificate

16 December 2010

**6. Signature**

For this certificate to be valid, it must be signed by the certifying authority

Signature



Name

Saeid Askarian (For Advance Building Approvals Pty Ltd)

Flat/Level

Suite 1004, Level 10

Suburb or town

Sydney

Telephone

(02) 9283 6299

Street number, street name

370 Pitt Street

State

NSW

Postcode

2000

Fax

(02) 9283 6252

If the certifier is an accredited certifier

Accreditation body of the certifier

Building Professionals Board

Accreditation no of the certifier

BPB0014

Fire Safety Schedule

Item No	Required New Measures	Typical Standard of Performance	
1	Emergency lighting	BCA Clause E4 2 E4 4,	AS/NZS 2293 1-1998
2	Exit signs	BCA Clauses E4 5 NSW E4 6 & E4 8	AS/NZS 2293 1-1998
3	Required fire rated light weight construction enclosure to the required fire rated walls shafts, ductwork and structural elements	BCA Clause C1 8, Spec A2 4 & Spec C1 8	AS/NZS 1530 3-1999 AS 1530 4-1997, ASTM E72-80-1981 ASTM E695-79 1985 Part C of BCA Tested prototypes for specific application and manufacturer's spec
4	Path of travel	BCA Part D NSW Part D	
5	Portable fire extinguishers	BCA Clause E1 6	AS 2444-2001

Mandatory Critical Stage Inspection Report

Type of Critical Stage Inspection		Please indicate Class of building and circle below the Type of CSI carried out for this Report  (Class 9b )		
		Class 1, 10	Class 2, 3, 4	Class 5, 6, 7, 8 & 9
1	At the commencement of the building work, and	✓	✓	✓
2	After excavation for, and prior to the placement of any footings	✓	X	X
3	Prior to pouring any in-situ reinforced concrete building element	✓	X	X
4	Prior to covering of the framework for any floor wall, roof or other building element	✓	X	X
5	Prior to covering waterproofing in any wet areas (only 10% for Class 2,3 &4 buildings)	✓	✓	X
6	Prior to covering any stormwater drainage connections	✓	✓	✓
7	After the building work has been completed and prior to any occupation certificates being issued in relation to the building	✓	✓	✓

Site Details	
Address	26 Tasman Rd. Avalon
Location of wet areas	N/A
DA/CC/CDC No	CF09401

Record of Inspection		
Date of Inspection	07 DECEMBER 2010	
Inspection by PCA	Name of PCA	Saeid Askarian
	Accreditation No	BPB0014 (Building Professionals Board)
<del>Inspection by other Accredited Certifier</del>	Name of Accredited Certifier	
	Accreditation No	
	Has Report by Accredited Certifier been attached? (Yes / No)	
Was work carried out satisfactorily?	(Yes/ No)	
Notes	MODULAR BUILDING ONLY	

Missed Inspection		
Was Inspection missed due to "unavoidable circumstances"?	(Yes / No)	If yes, what are the unavoidable circumstances?
Principal Contractor	Name	
	Address	
	Tel	
Was the work carried out satisfactorily?	(Yes / No)	
Evidence of compliance received		
Notes		

Signature of PCA \_\_\_\_\_

Date \_\_\_\_\_

Mandatory Critical Stage Inspection Report

Type of Critical Stage Inspection		Please indicate Class of building and circle below the Type of CSI carried out for this Report  (Class 9B )		
		Class 1, 10	Class 2, 3, 4	Class 5, 6, 7, 8 & 9
1	At the commencement of the building work, and	✓	✓	✓
2	After excavation for and prior to the placement of any footings	✓	X	X
3	Prior to pouring any in-situ reinforced concrete building element	✓	X	X
4	Prior to covering of the framework for any floor, wall, roof or other building element	✓	X	X
5	Prior to covering waterproofing in any wet areas (only 10% for Class 2,3 &4 buildings)	✓	✓	X
6	Prior to covering any stormwater drainage connections	✓	✓	✓
7	After the building work has been completed and prior to any occupation certificates being issued in relation to the building	✓	✓	✓
Site Details				
Address		2B TASMAN ROAD AVALON		
Location of wet areas		N/A		
DA/CC/CDC No		CF09401		
Record of Inspection				
Date of Inspection		15.11.10		
Inspection by PCA	Name of PCA	Saeid Askarian		
	Accreditation No	BPB0014 (Building Professionals Board)		
<del>Inspection by other Accredited Certifier</del>	Name of Accredited Certifier			
	Accreditation No.			
	Has Report by Accredited Certifier been attached? (Yes / No)			
Was work carried out satisfactorily?	(Yes/No)			
Notes				
Missed Inspection				
Was Inspection missed due to "unavoidable circumstances"?	(Yes / No)	If yes, what are the unavoidable circumstances?		
Principal Contractor	Name			
	Address			
	Tel			
Was the work carried out satisfactorily?	(Yes / No)			
Evidence of compliance received				
Notes				

Signature of PCA \_\_\_\_\_

Date 15/11/10

Mandatory Critical Stage Inspection Report

Type of Critical Stage Inspection		Please indicate Class of building and circle below the Type of CSI carried out for this Report  (Class 9b)		
		Class 1 10	Class 2, 3, 4	Class 5, 6, 7, 8 & 9
1	At the commencement of the building work and	✓	✓	✓
2	After excavation for, and prior to the placement of any footings	✓	X	X
3	Prior to pouring any in-situ reinforced concrete building element	✓	X	X
4	Prior to covering of the framework for any floor, wall, roof or other building element	✓	X	X
5	Prior to covering waterproofing in any wet areas (only 10% for Class 2,3 &4 buildings)	✓	✓	X
6	Prior to covering any stormwater drainage connections	✓	✓	✓
7	After the building work has been completed and prior to any occupation certificates being issued in relation to the building	✓	✓	✓
Site Details				
Address		2b TASMAN RD AVALON		
Location of wet areas		N/A		
DA/CC/CDC No		CF09-401		
Record of Inspection				
Date of Inspection		21.09.10		
Inspection by PCA	Name of PCA	Saeid Askarian		
	Accreditation No	BPB0014 (Building Professionals Board)		
Inspection by other Accredited Certifier	Name of Accredited Certifier			
	Accreditation No			
	Has Report by Accredited Certifier been attached? (Yes / No)			
Was work carried out satisfactorily?		(Yes / No)		
Notes				
Missed Inspection				
Was Inspection missed due to "unavoidable circumstances"?	(Yes / No)	If yes, what are the unavoidable circumstances?		
Principal Contractor	Name			
	Address			
	Tel			
Was the work carried out satisfactorily?		(Yes / No)		
Evidence of compliance received				
Notes				

Signature of PCA \_\_\_\_\_

Date 21/9/10

# Fire Safety Certificate

issued under Environmental Planning and Assessment  
Regulation 2000

Date received 14/12/10 DA or CDC no CF09401CC01

The owner of a building or the owner's agent, needs to provide a fire safety certificate to the certifying authority (a council or a private certifier) with an application for an occupation certificate. You can use this form to do so. A copy of the certificate also needs to be given to the Commissioner of New South Wales Fire Brigades, and displayed in the building in a prominent position. To complete this form, please place a cross in the boxes ☐ and fill out the white sections as appropriate.

## 1. Details of the building being certified

Name of the owner of the building or part of the building

First name

Family name (or Name of company)

BARRETT DEY MONTESSORI SCHOOL

Address of the building

Flat/Level

Street number, street name

2b Tasman Road

Suburb or town

Postcode

Avalon

2107

Nearest cross street

This certificate is for:

☐ part of the building

☒ the whole of the building

Description of the building or part of the building

Install modular classroom building

## 2. Assessment of fire safety measures

List of each essential fire safety measure specified in the Fire Safety Schedule for the building.

Measure

Standard of performance required by the fire  
safety schedule

Date of assessment

Refer to page 3

If you need more space, please attach additional pages.



**3. Type of certificate**

This is

- ☐ an interim fire safety certificate  
☒ a final fire safety certificate

Date of this certificate

15/12/2010**4. Certification**

I Mark Conroy of APB MODULAR  
being the owner of the building described above, or the agent of the owner, certify that

- ☒ each of the essential fire safety measures listed above  
• has been assessed by a properly qualified person, and  
• was found, when it was assessed by that person to be capable of performing to  
at least the standard required by the current fire safety schedule for the building,  
☒ the information contained in this statement is true and accurate to the best of my  
knowledge and belief.

**5. Information attached to this certificate**

- ☒ The current fire safety schedule for the building

**6. Signature**

The owner of the building, or the agent's owner, must complete and sign the certificate

Signature



Name

MARK CONROY

Address

21 COXS PLACE  
Glendenning NSW 2761

The capacity in which you are signing if you are not the owner of the building

Builder**7. Privacy policy**

You need to provide the information in this certificate to the certifying authority if you are applying for an occupation certificate. You also need to give the information to the council and the Commissioner of New South Wales Fire Brigades if a fire safety order has been made for the building once you have satisfied that order. If you do not supply a fire safety certificate as required, you will be in breach of the *Environmental Planning and Assessment Act 1979* and you could be found guilty of an offence and/or required to take further action. Please contact the council if the information you have provided in this certificate is incorrect or changes.

Fire Safety Schedule (As listed in Attachment C of the CC/CDC)

The following list of essential fire safety measures are certified in this Fire Safety Certificate

Item No	Date of Assessment	Required New Measures	Typical Standard of Performance	
1	14 12 10	Emergency lighting	BCA Clause E4 2, E4 4	AS/NZS 2293 1-1998
2	14 12 10	Ext signs	BCA Clauses E4 5 NSW E4 6 & E4 8	AS/NZS 2293 1-1998
3	8 6 10	Lightweight Construction including required fire rated light weight construction enclosure to the required fire rated walls, shafts ductwork and structural elements and fire isolated stairs	BCA Clause C1 8, Spec A2 4 & Spec C1 8	AS/NZS 1530 3-1999 AS 1530 4-1997, ASTM E72-80-1981 ASTM E695-79-1985 Part C of BCA Tested prototypes for specific application and manufacturer's spec
4	14 12 10	Path of travel	BCA Part D, NSW Part D	
5	12 11 10	Portable fire extinguishers	BCA Clause E1 6	AS 2444-2001

\* Indicate "Date of Assessment" for items that have been installed or modified, or enter "N/M - Not modified" for items that are not modified as part of the works for this project

Confirmation of Non-modified Essential Fire Safety Measures

I, the undersigned, confirm that all essential fire safety measures marked as "Not modified" in the above Table are not required to be modified and have not been modified as part of the proposed works completed under the Construction Certificate / Complying Development Certificate Application

Signature [Signature]  
Full Name Mark Connor  
Company Name APB MODULAR  
Contact Tel No 02 8602 8024  
Date 15/12/2010



**KNEEBONE & BERETTA CONSULTING** PTY LTD  
CONSULTING STRUCTURAL & CIVIL ENGINEERS  
ABN 43 734 246 264 ACN 137 900 764

15 19 MARION STREET  
PARRAMATTA NSW 2150  
SYDNEY - AUSTRALIA  
PHONE +612 9635-8299  
INTERNET [www.kneeboneandberetta.com](http://www.kneeboneandberetta.com)

FAX +612 9891-2337  
EMAIL [info@kneeboneandberetta.com](mailto:info@kneeboneandberetta.com)

Ref 75431-C4

14 December 2010

APB Pty Ltd  
P O Box 6075  
BLACKTOWN NSW 2148

**Proposed Portable Classroom at  
Tasman Road, North Avalon  
for Barrenjoey Montessori School**

This is to certify that a visual inspection was made by us at the Glendenning factory during fabrication of the framing for the above portable building complex on 17 September 2010

Items inspected included ground floor walls, floor, chassis, lifting points and ceiling panels, first floor walls, floor, chassis and ceiling/roof beams

We are reasonably satisfied that the members were installed in accordance with the structural certificate 75431-C1B and our instructions ready for the fixing of cladding, linings and fire rating

Please note that to the extent this certificate is based on a visual inspection, this certificate does not extend to any matters concealed or not reasonably apparent on a visual inspection

Further this certificate may only be relied upon by the addressee in the absence of our written consent

for **BRUCE N JAMIESON**  
**KNEEBONE & BERETTA**  
**Consulting Pty Ltd**

**DIRECTORS**

ENRICO L BERETTA BE(ETH) FIEAust CPEng(Reg)

BRUCE N JAMIESON BE MIEAust CPEng(Reg)

ANGELO J VARDOUNIOTIS BE MIEAust CPEng(Reg)

INSPECTION CERTIFICATE - Structural Works

Site Details			
Level/Unit no/ Flat no	2b	Street no / Street name	Tasman Road
Suburb	Avalon	State	NSW
		Postcode	2107
Description of Work	Modular classroom facilities		
Details of development / building approval			
DA / CDC	DA / CDC no (incl all subsequent S96 approvals)	Consent authority	Date original DA granted
	380/09	Pittwater Council	24 November 2009
CC	All CC s issued under ABA file no	Certifying authority	Date 1 <sup>st</sup> CC issued
	CF09401	Advance Building Approvals	XXXX 2009

Certification

I, the undersigned, certify that

1 The following completed structural work

Inspection Date	Member	Item Inspected	Certificate Ref	Date of Certificate
17-09-2010	Fabncation of framing	Ground floor walls floor, chassis, lifting points and ceiling panels, first floor walls, floor chassis and ceiling/roof beams	75431-C4	14 December 2010
21-09-2010	Base of pad footings under brick walls	Size and foundation bearing	75431-C2	8 October 2010
14-10-2010	Stair pad footings	Size and foundation bearing	75431-C3	22 October 2010
22-10-2010	Deck pad footings	Size and foundation bearing	75431-C3	22 October 2010
22-10-2010	Building installation	Tie downs and ground floor/first floor frame coupling	75431-C3	22 October 2010

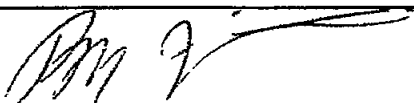
that form part of the proposed development has been inspected and are deemed to comply with

- All requirements as specified under Design Certificate 75431-C1B dated 20 July 2010, 75431-R1 dated 30 September 2010 and 75431-R2 dated 1 October 2010 issued for the work being certified, AND
- The full set of certified structural design drawings as listed on our Design Certificate 75431-C1B

2 I am an appropriately qualified practising structural engineer and have

- a) Appropriate tertiary qualifications in Civil or Structural Engineering, AND
- b) Corporate membership of the Institution of Engineers Australia or equivalent AND
- c) Relevant experience in the area of work being certified, AND
- d) Appropriate current professional indemnity insurance (taken up by me or my employer as appropriate) to the satisfaction of the building owner or the principal authorising the design work

The following details must be provided in full

Name	Bruce N Jamieson	Qualification	BE MIEAust CPEng(Reg) 375195
Company Name	Kneebone & Beretta Consulting Pty Ltd	ABN No	43 734 246 264
Company Address	15 Manon Street, PARRAMATTA-NSW 2150	Tel	02 9635-8299
Signature		Position Title	Director
		Date	14 December 2010

INSTALLATION / INSPECTION CERTIFICATE – Mechanical Services

Site Details					
Level/Unit/Shop no	2b	Street no / Street name		Tasman Road	
Suburb	Avalon	State	NSW	Postcode	2107
Description of Work:	Modular Classroom facilities				

Certification


Item No	Proposed Items of Work or Services installed, implemented and/or constructed in the building/development	Enter the intended design standard of performance (eg BCA E2 2, AS1668.1, or DA Consent Condition No , etc) (Refer to relevant version of Australian Standards and Other standards of performance applicable to this project.)
1	Mechanical Ventilation (for office, shop or other areas not provided with natural ventilation)	BCA Clause F4 5 and AS 1668

I the undersigned certify that

- a The above work / services have been installed in the above building or development in accordance with design documentations and the tested prototypes/systems relevant to their applications complying with relevant BCA requirements and manufacturers' specifications (where appropriate),
- b These work/services have been inspected, assessed and tested (where appropriate) to perform in accordance with the relevant provisions of the Building Code of Australia, the relevant Australian Standards and other standard of performance as indicated above

I also certify that I am an appropriately qualified and competent person practising in the relevant area of work I have recognised relevant experience in the area of work being certified I am / My company is (~~delete as appropriate~~) holding appropriate current insurance policy to the satisfaction of the building owner or the principal authorising the installation work being certified

The following details must be provided in full

Name	CRAIG Harradine	Qualification	ELECTRICAL CONTRACTOR
Company Name	ETH ELECTRICAL P/L	ABN No	78130943010
Company Address	14 GLENBROOK ST SM KENNETH	Tel	0417233727
Signature		Position Title	Director
		Date	14-12-10

INSTALLATION / INSPECTION CERTIFICATE - Essential Fire Safety Measures

Site Details					
Level/Unit no./ Flat no	2b	Street no / Street name		Tasman Road	
Suburb	Avalon	State	NSW	Postcode	2107
Description of Work	Modular classroom facilities				
Details of development / building approval					
DA / CDC	DA / CDC no (incl all subsequent S96 approvals)		Consent authority		Date original DA granted
	380/09		Pittwater Council		24 November 2009
CC	All CC s issued under ABA file no		Certifying authority		Date 1 <sup>st</sup> CC issued
	CF09401		Advance Building Approvals		27 May 2010

Certification

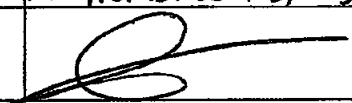
Item No.	Tick box for items to be certified (✓)	Proposed Items of Work or Services installed or constructed in the building	Enter the intended design standard of performance (eg BCA E2.2; AS1668.1, Fire Eng. Solutions, etc)	
			Refer to relevant version of Australian Standards and Other standards of performance in the applicable BCA version for this project.	
			BCA Clause (BCA 2010)	Relevant Australian Standard or Other Standard
1	✓	Emergency lighting	BCA Clause E4 2 E4 4,	AS/NZS 2293 1-1998
2	✓	Exit signs	BCA Clauses E4 5 NSW E4 6 & E4 8	AS/NZS 2293 1-1998
3		Lightweight Construction including required fire rated light weight construction enclosure to the required fire rated walls shafts ductwork and structural elements and fire isolated stairs	BCA Clause C1 8 Spec A2 4 & Spec C1 8	AS/NZS 1530 3-1999 AS 1530 4-1997 ASTM E72-80-1981 ASTM E695-79-1985 Part C of BCA Tested prototypes for specific application and manufacturer s spec
4	✓	Path of travel	BCA Part D NSW Part D	
5		Portable fire extinguishers	BCA Clause E1 6	AS 2444-2001

I, the undersigned, certify that.

- a the above essential fire safety measure(s) has/have been installed in the above building in accordance with
  - tested prototypes /systems for application complying with relevant BCA requirements and manufacturers specifications (where appropriate),
  - design documentations as certified in the Design Certificate issued for the above items,
- b These items have been inspected, assessed and tested (where appropriate) to perform in accordance with
  - the design criteria and certified drawings as specified in the Design Certificate issued for the above items, and/or
  - the provisions of the Building Code of Australia the relevant Australian Standards and other standard of performance as indicated above
- c The assessment, inspection or testing have been carried out by an appropriately qualified and competent person from our company, who is practising in the relevant area of work with recognised relevant experience in the area of work being certified
- d I am / My employer is (~~delete as appropriate~~) holding appropriate current insurance policy to the satisfaction of the building owner or the principal authorising the installation work being certified

The following details must be provided in full

Name	CRAIG HARRADINE	Qualification	ELECTRICIAN CONTRACTOR
Company Name	C T H ELECTRICAL P/L	ABN No	78130943010

Company Address	14 GLENBROOK ST STM PENRITH	Tel	0417233727
Signature		Position Title	DIRECTOR
		Date	14-12-10



T1 Building, Norwest Business Park  
Unit 211, Level 2  
14 Lexington Drive BELLA VISTA  
Phone 02 9854 9400 Fax 02 9854-9444  
A B N 44 096 628 125  
[www.spectrumfire.com.au](http://www.spectrumfire.com.au)

### Final Fire Safety Certificate (Form 15) Contractors

Issued under the Environmental Planning and Assessment Regulation 2000

Name of Person I Jennifer Wilson  
Name of Subcontractor and ACN of, Spectrum Fire & Security ABN 44 096 628 125

Certify that

- a) Each of the essential fire measures listed below
- \* has been assessed by a person (chosen by me) who was properly qualified to do so, and
  - \* Was found, when it was assessed, to have been properly implemented and to be capable of performing and has been commissioned and tested and proved to be operating to a standard not less than that required by the standard of performance scheduled

b) The information contained in this certificate is, to the best of my knowledge and belief, true and accurate

Location Street Barranjoey Montesson School 2 Tasman Rd Avalon NSW  
Side of street \_\_\_\_\_  
Nearest Cross Street \_\_\_\_\_  
Number or name of building \_\_\_\_\_

New or refurbishment Refurbishment

refurbishment Describe extent if a Description of part (where applicable)  
Installation of portable fire extinguishers  
\_\_\_\_\_  
\_\_\_\_\_

List each essential service (fire safety measures) and applicable standard for this certificate

Essential Service	Standard of Performance
Portable Fire Extinguishers	AS2444-2001

Date of this certificate Dated this 12<sup>th</sup> day of November 2010

Signature 

A copy of this certificate together with the relevant fire safety schedule will be forwarded to the Council and the Commissioner of the NSW Fire Brigades

#### Note

The person who carries out the assessment

- ◆ Must inspect and verify the performance of each essential service (fire safety measures) being assessed and
- ◆ In the case of this final fire safety certificate whether it be for a new building or an alteration to or enlargement or extension of an existing building that person must test and confirm the operation of each item of equipment installed in the building



**SYDNEY**  
88 Vore Street Silverwater NSW 2128  
Ph (02) 9748 8911 Fax (02) 9748 8944

**BRISBANE**  
73-75 Basalt Street Geebung QLD 4034  
Ph (07) 3865 7644 Fax (07) 3865 7944

**MELBOURNE**  
17-33 Milton Parade, Malvern VIC 3144  
Ph (03) 9832 0733 Fax (03) 9832 0610

Email [info@rbsa.com.au](mailto:info@rbsa.com.au)  
Web [www.remedial.com.au](http://www.remedial.com.au)

**Certificate of Completion**

**Fire Protection System Installation Certification Ref No** NC5046JA

**Installation Location**

Barrenjoey Montessori School

**Facility Owners/Managers**

John Hodgkinson - Managing Director  
Bruce Donnachine - Production Manager

**Client**

Australian Portable Buildings Pty Ltd, 21 Cox Place Glendenning NSW 2761

This certificate of completion is issued to certify that the fire protection system/s as described in the quotation document NC5046JA have been installed by Remedial Building Services Australia Limited at the abovementioned location. The installation has been carried out in accordance with the *Firas Australia* Certification Scheme guidelines and in compliance with *Certifire Australia* fire protection contractor schedule CA033 (*Certifire Australia* Installer Certificate No 013). The fire protection system is described in the schedule below -

Elements Fire Rated	Location in Structure	Fire Protection System	FRL Provided
100SHS9 columns	Ground floor	S707 -120 Intumescent	120 minute

\* Nullfire S707-60 and S707-120 intumescent basecoats are accredited by *Certifire Australia* to comply with the BCA Specification A2.3. The products have been tested to AS1530.4-2005 and assessed in accordance with AS4100-1998 – Supplier Certificate Nos 014 & 019.

**Certification Declaration**

I Jeffrey Anderson of Remedial Building Services Australia Limited certify that the information contained in this certificate is, to the best of my knowledge and belief, true and accurate.

**Signed**

**Date** 25 October 2010



ISO 9001 2000 ISO 4001 2004

Correspondence to  
PO Box 4  
Austral NSW 2179  
Fax 02 9606 0557  
e enquires@multiquip.com.au



260 Tenth Avenue  
(Cnr Tenth Ave & Kelly St)  
Austral NSW 2179  
Phone 02 9606 9011  
www.multiquip.com.au

Attn Project Manager  
APB  
21 Cox Place Glendenning  
NSW 2761

RE Design Certificate for 2b Tasman Rd, Avalon NSW 2107

This certificate is confirming the design standards of the stairs for Barrenjoey Montessori School, 2b Tasman Rd, Avalon

All access stairways, stair handrails, paths of travel, tactile ground surface indicators have been designed in accordance with the following design standards

BCA Part D3, AS 1428 1, AS1428 2

BCA Clause D3 8, AS 1428 4

In addition condition C6 of DA 380/09 issued by Pittwater Council dated 24/11/2009

This certificate is in relation to the above items and is to certify that these items have been built in accordance with the Building Code of Australia and Australian Standards

Regards,



Jason Mikosic

Company Director

INSTALLATION / INSPECTION CERTIFICATE - Miscellaneous Work / Services

Site Details			
Level/Unit no / Flat no	2b	Street no / Street name	Tasman Road
Suburb	Avalon	State	NSW
		Postcode	2107
Description of Work	Modular classroom facilities		
Details of development / building approval			
DA / CDC	DA / CDC no (incl all subsequent S96 approvals)	Consent authority	Date original DA granted
	380/09	Pittwater Council	24 November 2009
CC	All CC s issued under ABA file no	Certifying authority	Date 1 <sup>st</sup> CC issued
	CF09401	Advance Building Approvals	27 May 2010

Certification

Item No	Tick box for items to be certified (✓)	Proposed Items of Work or Services installed, implemented and/or constructed in the building/development	Enter the intended design standard of performance (eg BCA E2.2; AS1668 1, or DA Consent Condition No , etc) (Refer to relevant version of Australian Standards and Other standards of performance in the applicable BCA version for this project.)
1		Glass Work	BCA Clause B1 4(h) AS 2047 AS 1288 AS 1170
2	✓	Balustrades / Handrails	BCA Clause D2 16 to D2 18 AS 1170
3	✓	Construction of Sanitary Compartments	BCA Clause F2 5
4		Waterproofing of wet areas	BCA Clause F1 7 tested prototype system for specific application and manufacturers specification
5	✓	Façade	AS1170 condition B22 of DA 380/09 issued by Pittwater Council dated 24 11.2009 and manufacturer's specification
6		Stormwater Drainage	AS 3500 condition B3 B4 B21 C1 C2 of DA 380/09 issued by Pittwater Council dated 24 11 2009 and BCA Clause F1 1
7	✓	Fire Hazard Properties of materials or assemblies in the building	BCA Clause C1 10 and specification C1 10 C1 10a
8	✓	Slip resistance of all floor including stair finishes	AS/NZS 4586 HB 197-1999 AND BCA
9		Lightweight construction including lightweight fire rated construction and fire rated ceiling to the underside of floor Required fire rated light weight construction enclosure to the required fire rated structural elements	BCA Clause C1 8 Spec A2 4 & Spec C1 8 AS/NZS 1530 3 1999 AS 1530 4 1997 ASTM E72-80-1981 ASTM E695-79-1985 Part C of the BCA tested prototypes for specific application and manufacturer's spec and alternative solution
10	✓	Site landscaping	condition B6 B8 B9 B10 B11 B20 D11 of DA 380/09 issued by Pittwater Council dated 24 11.2009


I the undersigned certify that.

- a The above work / services have been installed / implemented / constructed / in the above building or development in accordance with
  - tested prototypes /systems for application complying with relevant BCA requirements and manufacturers' specifications (where appropriate)
  - design documentations as certified in the Design Certificate issued for the above items,
- b These work/services have been inspected assessed and tested (where appropriate) to perform in accordance with
  - the design criteria and certified drawings as specified in the Design Certificate issued by the relevant Design Consultant for the above items, and/or
  - the provisions of the Building Code of Australia the relevant Australian Standards and other standard of performance as indicated above

I also certify that I am an appropriately qualified and competent person practising in the relevant area of work I have recognised relevant experience in the area of work being certified I am / My company is (~~delete as appropriate~~) holding appropriate current insurance policy to the satisfaction of the building owner or the principal authorising the installation work being certified

The following details must be provided in full

Name	ADAM STEWART	Qualification	BCAT (BUSINESS MGMT)
------	--------------	---------------	----------------------

Company Name	APB MODULAR	ABN No	
Company Address	21 COE PLACE GLENDALE	Tel	04 07 03 1071
Signature		Position Title	CONSTRUCTION MANAGER
		Date	15-12-10

# **ADVANCE WATERPROOFING SPECIALIST P/L CERTIFICATE & WARRANTY**

**ADDRESS: 21 COX PL GLENDENING/APB BARRENGOEY MONTESSORI  
SCHOOL**

---

**THIS SYSTEM IS GUARANTEED TO MAINTAIN ITS WATERPROOFING  
INTEGRITY WHEN INSTALLED TO DO MANUFACTURER'S SPECIFICATION  
FOR SEVEN YEARS FROM THE DATE OF INSTALLATION.**

**THIS SYSTEM IS CARRIED OUT IN ACCORDANCE WITH REQUIREMENTS  
AND CONSTRUCTION TECHNIQUES PER AUSTRALIAN STANDARD 3740 AND  
APPENDIX FOR WALL / FLOOR COMBINATIONS.**

**WARRANTY EXCLUDES STRUCTURAL DEFECTS IN THE BUILDING AND  
DAMAGE TO MEMBRANE BY OTHER TRADES ALSO ANY INCORRECT  
APPLICATION OF THE TILES, SHOWER & DOORS ANGLES.**

**JOB DESCRIPTION : THREE TOILET (PORTABLE).**

**THIS INSTALLATION WAS CARRIED OUT BY  
ADVANCE WATERPROOFING SPECIALIST P/L**

**LICENCE#166518C  
MOB:0409 99 66 42**

**DATE :03 /10 /2010**

**SIGNED:**



---

Date of Survey 20 September 2010  
Our Reference 3981-SO-200910  
Not to scale

Page 1 of 1 pages

## SKETCH

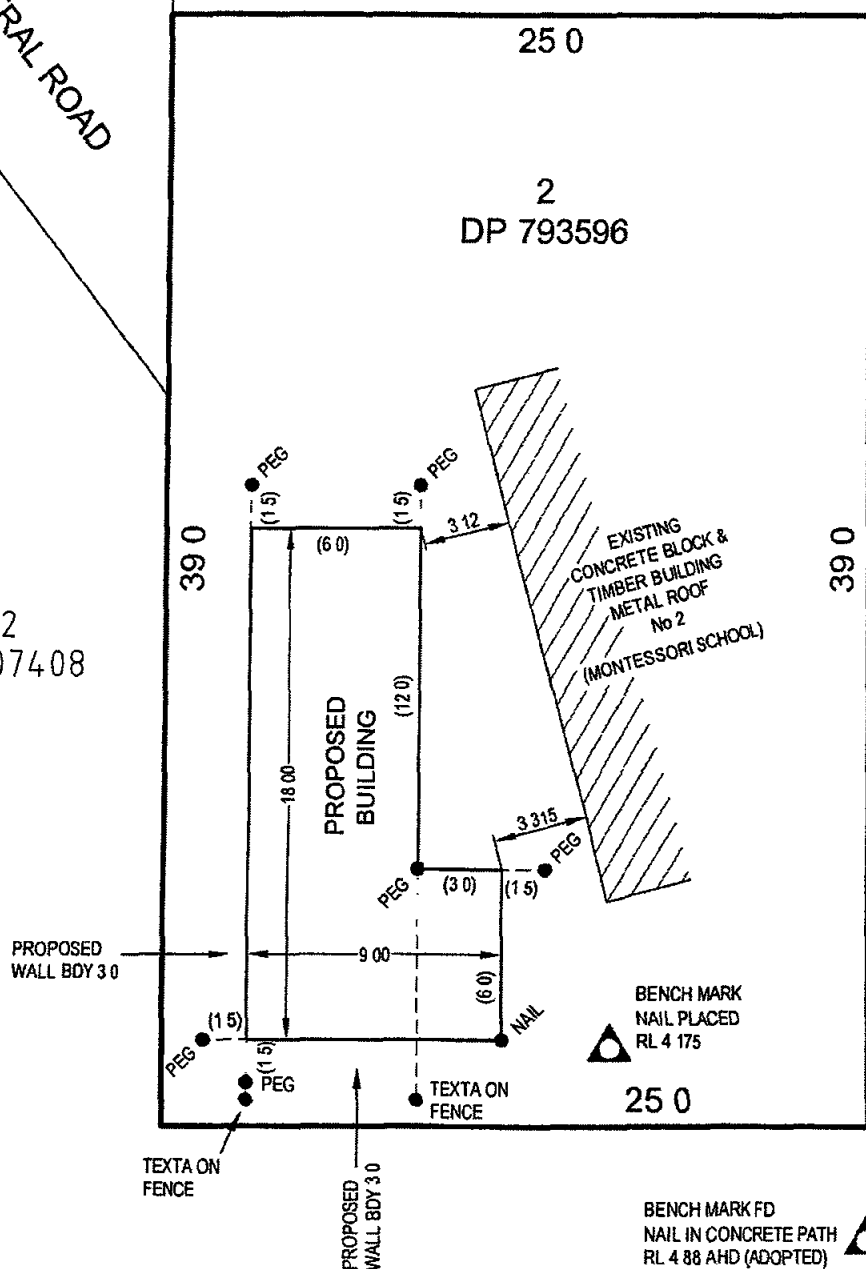
SHOWING MARKS PLACED AT  
BARRENJOEY MONTESSORI SCHOOL  
No 2 TASMAN ROAD, AVALON



1  
DP 793596

CENTRAL ROAD

202  
DP 1107408



### NOTE

PLEASE CHECK THE STATED DIMENSIONS AGAINST DESIGN PLANS  
AND MARKS PLACED BEFORE COMMENCING CONSTRUCTION

ORIGIN OF LEVELS BENCH MARK NAIL IN CONCRETE PATH RL 4.88  
AHD TAKEN FROM REFERENCE PLAN

REFERENCE  
PLAN PREPARED BY APB (AUSTRALIAN PORTABLE BUILDINGS) PLAN  
DRAWING No 20895 B01 REV C DATED 10/09/09

DIMENSIONS ALSO GIVEN ONSITE BY JOE PAPDI

Adam Veersema BE (Surv & SIS) UNSW MIS (NSW)

**USHER & COMPANY**  
Surveying & Land Development Consultants

Usher & Company Pty Limited ABN 70 128 414 602  
PO Box 1199 Chatswood NSW 2057 Phone 02 9411 8166 Fax 02 9411 8177

Surveyor registered under the  
Surveying and Spatial Information Act, 2002

TO TASMAN ROAD

INSTALLATION / INSPECTION CERTIFICATE – Energy Efficiency

Site Details			
Level/Unit no./ Flat no	2b	Street no / Street name	Tasman Road
Suburb	Avalon	State	NSW
		Postcode	2107
Description of Work	Modular classroom facilities		
Details of development / building approval			
DA / CDC	DA / CDC no (incl all subsequent S96 approvals)	Consent authority	Date original DA granted
	380/09	Pittwater Council	24 November 2009
CC	All CC's issued under ABA file no	Certifying authority	Date 1 <sup>st</sup> CC issued
	CF09401	Advance Building Approvals	27 May 2010

Certification


Item No	Proposed Items of Work or Services installed, implemented and/or constructed in the building/development	Enter the intended design standard of performance (eg BCA E2.2, AS1668 1, or DA Consent Condition No , etc) (Refer to relevant version of Australian Standards and Other standards of performance applicable to this project.)
1	Energy Efficiency (Hot water)	BCA Part J7
2	Energy Efficiency (Artificial Lighting and Power)	BCA Part J6

I the undersigned, certify that:

a The above work / services have been installed in the above building or development in accordance with design documentations and the relevant provisions of the Building Code of Australia the relevant Australian Standards and manufacturers' specifications (where appropriate),

I also certify that I am an appropriately qualified and competent person practising in the relevant area of work. I have recognised relevant experience in the area of work being certified I am / My company is (~~delete as appropriate~~) holding appropriate current insurance policy to the satisfaction of the building owner or the principal authorising the installation work being certified

The following details must be provided in full

Name	CRAIG HARRADINE	Qualification	ELECTRICAL CONTRACTOR
Company Name	C T H ELECTRICAL PTY LTD	ABN No	78130943010
Company Address	14 GLENBROOK ST SMITHS BEACH	Tel	0417233727
Signature		Position Title	DIRECTOR
		Date	14-12-10



15 Astill Drive  
Orange NSW 2800  
Australia  
ABN 21 123 606 600

Email [sales@westal.com.au](mailto:sales@westal.com.au)  
Tel 02 6391 4800  
Fax 02 6360 1182

## COMPLIANCE / GLAZING CERTIFICATE

PAGE 1 OF [ ]

Date 08/09/2010 Job No 14855 Cust Ref 45229

**Customer**  
Australian Portable Buildings  
21 Cox Place  
Glendenning NSW 2761

**Job Ref**  
BARRENJOEY MONTESSO  
SCHOOL  
C/- 21 COX PLACE  
GLEN DENNING

This is to certify that the items scheduled for the above project are glazed in accordance with AS1288-2006, sections 1 to 7 and 9 with windows and doors meeting the performance requirements of AS2047-1999 and BCA - 2010 Part B1 4 and F1 13

Item No	Description	Ht x Wd	Qty	Glazing Zone	Water Penetration
1	131 SLIDING WINDOW	1500 2000	13	N2-700 DWP	150pa
2	131 SLIDING WINDOW	1500 2000	1	N2-700 DWP	150pa
3	131 INSECT SCREEN	1500 2000	1		
4	131 FIXED LIGHT	1200 1180	2	N2-700 DWP	150pa
5	131 SLIDING WINDOW	1200 1180	1	N2-700 DWP	150pa
6	131 SLIDING WINDOW	600 2400	1	N2-700 DWP	150pa
7	131 SLIDING WINDOW	600 2400	10	N2-700 DWP	150pa
8	PARTS-MAIN		10		
9	131 SLIDING WINDOW	600 1100	2	N2-700 DWP	150pa
10	131 FIXED LIGHT	600 2400	6	N2-700 DWP	150pa
11	131 FIXED LIGHT	775 1200	1	N2-700 DWP	150pa
12	131 FIXED LIGHT	775 1200	1	N2-700 DWP	150pa
13	131 FIXED LIGHT	595 1200	1	N2-700 DWP	150pa
14	131 FIXED LIGHT	595 1200	1	N2-700 DWP	150pa
15	131 SLIDING WINDOW	1190 2000	3	N2-700 DWP	150pa

N J Ovenden  
Manager/Director  
West-AI Windows Pty Ltd

The Builder / Installer certifies that the windows and doors supplied have been installed correctly and the human impact glass located in the correct openings

Builder / Installer Signature

Date

30, 9, 10





15 Astill Drive  
Orange NSW 2800  
Australia  
ABN 21 123 606 600

Email [sales@westal.com.au](mailto:sales@westal.com.au)  
Tel 02 6391 4800  
Fax 02 6360 1182

## COMPLIANCE / GLAZING CERTIFICATE

PAGE 1 OF [ ]

Date 08/09/2010 Job No 14855 Cust Ref 45229

**Customer**  
Australian Portable Buildings  
21 Cox Place  
Glendenning NSW 2761

**Job Ref**  
BARRENJOEY MONTESSO  
SCHOOL  
C/- 21 COX PLACE  
GLENDENNING

This is to certify that the items scheduled for the above project are glazed in accordance with AS1288-2006, sections 1 to 7 and 9, with windows and doors meeting the performance requirements of AS2047-1999 and BCA - 2010 Part B1 4 and F1 13

Item No	Description	Ht x Wd	Qty	Glazing Zone	Water Penetration
1	131 SLIDING WINDOW	1500 2000	13	N2-700 DWP	150pa
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14	131 FIXED LIGHT	595 1200	1	N2-700 DWP	150pa
15	131 SLIDING WINDOW	1190 2000	3	N2-700 DWP	150pa

N J Ovenden  
Manager/Director  
West-Al Windows Pty Ltd

The Builder / Installer certifies that the windows and doors supplied have been installed correctly and the human impact glass located in the correct openings

Builder / Installer Signature

Date

/ /




**CERTIFICATE OF COMPLIANCE**  
AUSTRALIAN STANDARDS | BUILDING CODE OF AUSTRALIA

<b>COMPLIANCE WITH AS3500 Plumbing and Drainage</b>	
<b>Date</b>	17 <sup>th</sup> November 2010
<b>Client</b>	Barrenjoey Montessori School 2 Tasman Road, Avalon NSW 2167
<b>Project</b>	Barrenjoey Montessori School
<b>Building Description</b>	Double Storey Classroom – 12 modules

This is to certify that the plumbing works to the modular building listed above was installed in accordance with Australian Standards requirements AS3500 "Plumbing and Drainage" Code

Yours sincerely

  
**Fred Healy**  
Factory Plumber, NSW  
Australian Portable Buildings

2251  
**Licence No**

15-11-10  
**Date**

NEW SOUTH WALES

Original to Local Authority

Account property Rate No

## PERMIT APPLICATION

- for Plumbing and Drainage Work

Serial No E

492569

Please supply requested information fully and neatly to ensure the prompt issue of the permit

## PROPERTY &amp; OWNER DETAILS

House No <b>25</b>	Lot No	Street <b>Tasman rd</b>	Suburb <b>Avalon</b>
Municipality Shire	Postcode	Nearest Cross Street	
Owner's Name		Full Address	

## LICENSEE'S DETAILS

Full Name <b>George Dimech</b>	Address for Notices <b>6 Briery PL Cranbrook</b>	Phone No <b>043019546</b>
Qualified Supervisor No <b>L-11076</b>	Expiry Date <b>13/4/2011</b>	Contractor/Company Partnership Licence No <b>136301C</b>
		Expiry Date <b>17/6/2011</b>

## WORK OF WATER SUPPLY / METER DETAILS

Size of Drilling No	Size of pipework Main or Mc's	Main Size-Size of Tee to be cut into Main	Size of Valve
Reference No	Size of Valve	Meter No	Drilling Date/Time
		Office Issued from	

Full Description of Work, At fixed meter or returned Meter and List the Number of Fittings to be Connected

- Carry out work of Water Supply
- Install a gas meter system
- On site water services where a dedicated water supply is installed
- Install Commission Main entrance of Thermostatic Mixing Valve
- Draw water from Water Meters supply standpipe or seal water so drawn
- Install alter disconnection remove a meter connected to service pipe
- Install alter disconnection remove a backflow prevention device

☐ CONTAINER T ☐ ZONE ☐ INDIVIDUAL

Fittings to be Connected	Number Existing	Number proposed	Connected to Drinking Water	Connected to Non Drinking Water
W C		4		
Basin		4		
Bath				
Shower				
Kitchen		6		
Laundry				
Other (Specify)				
Irrigation System				

## WORK OF SANITARY PLUMBING/DRAINAGE AND STORMWATER

Give full description of work and list the number of fittings to be connected

- Carry out work of sanitary plumbing/drainage
- Carry out work of Stormwater drainage
- Connection to Sewer
- Sewer Disconnector
- Connection to stormwater system
- Carry out Trade Waste work

Trade Waste Permit Number

Fittings to be Connected	Number Existing	Number proposed
W C		4
Basin		3
Bath		
Shower		
Kitchen		6
Laundry		
Other (Specify)		

## SEWERAGE/WATER SERVICE INSPECTION FEE

Date Fee Paid	Amount	Receipt No	Building Fee	Receipt No
	\$			
Authorising Officer	Office Agency	Drainage No Date		
Date of Commencement of Work	Estimated Date of Completion	Signature of Contractor		
<b>1/7/2010</b>	<b>27/11/2010</b>			

PLEASE COMPLETE DETAILS ON REVERSE

Serial No E 492569

## LICENSEE'S PERMIT - Please hand this section to the Licensee

- This is your PERMIT to carry out the work described on Permit application in accordance with provisions of the Local Utilities Act regulations and Codes of Practice
- This PERMIT is only valid when it bears the official stamp of the local utility. It must be produced on the request of any person duly authorised by the Local Utility. Some Local Utilities may require the PERMIT to be produced to obtain a water meter
- The corresponding numbered CERTIFICATE OF COMPLIANCE must be submitted by you to the Local Utility within two (2) working days of completion of the above work



# PITTWATER COUNCIL

ABN61340837871

Telephone 02 9970 1111

Facsimile 02 9970 7150

Postal Address

PO Box 882

Mona Vale NSW 1660

DX 9018 Mona Vale

Matt Hansen  
8am to 5pm Mon – Thurs, 8am to 4pm Fri  
Phone 9970 1178

6<sup>th</sup> December 2010

Mr Saeed Askarian  
Advanced Building Approvals Pty Ltd  
Suite 1004, 370 Pitt Street  
Sydney NSW 2000

Dear Mr Askarian,

**Re Landscape Plan Approved No N0380/09 Property 2B Tasman Road, Avalon**

The approved landscape plan (Sprout Drawing No DA 01 A 4<sup>th</sup> September 2009) for the above DA has been varied. This variance is due to the unavailability of some species which were on the approved landscape plan. The applicants have contacted Council and provided a list of species purchased from a local nursery including the substituted species. The species purchased are suitable locally native species and are therefore accepted by Council for planting on the site. There is no need for a Section 96 modification and the changes to the landscaping should not affect the issuing of the Occupation Certificate in Council's opinion.

If you have any questions, please do not hesitate to contact me on 99701178

Regards

**Matt Hansen**  
**Principal Officer Natural Resources**  
**Natural Environment & Education Unit**  
**Pittwater Council**

Email: [pittwater\\_council@pittwater.nsw.gov.au](mailto:pittwater_council@pittwater.nsw.gov.au) Web: [pittwater.nsw.gov.au](http://pittwater.nsw.gov.au)

Mona Vale Customer Service Centre  
Village Park 1 Park Street, Mona Vale

Avalon Customer Service Centre  
59A Old Barrenjoey Road, Avalon

Support Services  
Units 11, 12, 13 + 16/5 Vuko Place, Warriewood

Boondah Depot  
1 Boondah Road, Warriewood



Advance Building Approvals Pty Ltd  
Suite 1004 370 Pitt Street Sydney NSW 2000  
Tel (02) 9283 6299 Fax (02) 9283 6252

# Occupation Certificate Application Form

Date received      /      /      DA / CDC no     

If you want to occupy or use a new building, or change the use of an existing building, you need an occupation certificate before you can do so. You can use this form to apply for an occupation certificate. To complete the form, please place a cross in the boxes ☐ and fill out the white sections as appropriate. To minimise delay in receiving a decision about your application, please ensure you submit all relevant information.

You need to apply to the principal certifying authority you have appointed for the development if you want to occupy or use a new building.

## 1. Details of the applicant

Mr <input type="checkbox"/>	Ms <input type="checkbox"/>	Mrs <input type="checkbox"/>	Dr <input type="checkbox"/>	Other <input checked="" type="checkbox"/>	<u>Company</u>	
Applicant's name (company or individual)				Name of contact person (if applicant is a company)		
<u>Barran JCE Montessori</u>				<u>Glynis Lacey</u>		
Unit / Level	Street number, street name					
<u>2</u>	<u>Tasman Rd</u>					
Suburb or town	State	Postcode				
<u>Avalon</u>	<u>NSW</u>	<u>2107</u>				
Daytime telephone	Fax	Mobile				
<u>9973 1422</u>	<u>02 8422308</u>					
Email						
<u>ML0107@apb.com.au</u>						

## 2. Identify the land

Flat / Level	Street number, street name	
<u>23</u>	<u>Tasman Rd</u> <u>Avalon</u>	
Suburb or town	Postcode	
<u>Avalon</u>	<u>2107</u>	
Lot no.	Section	
DP/MPS no.	Volume/folio	

You can find the lot no., section, DP/MPS no. and volume/folio details on a map of the land or on the title documents for the land. If you need additional room, please attach a schedule and/or a map with these details.

### 3. Details of the development approvals granted

Is development consent required for the development?

No ☐

Yes ☒

Has development consent been granted after a development application was made?

Yes ☒

What is the development application no.?

380/09

What date was development consent granted?

24/11/09

No ☐

Has a complying development certificate been issued?

No ☐

Yes ☒

What is the complying development certificate no.?

What date was the certificate issued?

Has a construction certificate been issued for the building? A construction certificate is not needed if a complying development certificate has been issued

No ☐

Yes ☒

What is the construction certificate no.?

C509-401

What date was the certificate issued?

27.05.2010

### 4. Identify what you want to do

*If you want to occupy or use a new building that is only partially completed, or change the use of part of an existing building, you need an interim occupation certificate. If you want to occupy or use a new building that has been completed, or change the whole use of an existing building, you need a final occupation certificate.*

Are you going to occupy or use a new building?

No ☐

Yes ☒

Is the building:

☒ partially completed?

☒ completed?

Are you going to change the use of an existing building?

No ☐

Yes ☒

Do you want to change

☒ the use of part of the building?

☒ the whole use of the building?

## 5. Describe the building

If you are applying for an occupation certificate for part of a building - describe the part of the building

For what purpose do you propose to use the building or part of the building?

Classroom

For a new building

What is the class of the building under the Building Code of Australia?

96

*This can be found in the development consent or complying development certificate.*

To change the use of an existing building

What is the class of the existing building under the Building Code of Australia?

-

What is the new class of the building under the Building Code of Australia?

✓

*This can be found in the development consent or complying development certificate*

## 6. Information to be attached to the application

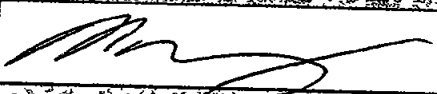
Please indicate the documents you have attached by placing a cross in the appropriate boxes ☐

- ☐ a copy of the development consent or the complying development certificate
- ☐ a copy of the construction certificate, where relevant
- ☐ a copy of the final fire safety certificate, where relevant
- ☐ a copy of the interim fire safety certificate, where relevant
- ☐ any other certificate or document on which you rely, eg a compliance certificate

## 7. Signature

The applicant, or the applicant's agent, must sign the application.

Signature



Name, if you are not the applicant

MARK CONNOR

In what capacity are you signing if you are not the applicant?

BUILDER

Date

15/12/2010

## 8. Privacy policy

The information you provide in this application will enable your application to be assessed by the certifying authority. If the information is not provided, your application may not be accepted. Please contact the council if the information you have provided in your application is incorrect or changes.

