Fire Safety Statement

Part 12 of the Environmental Planning and Assessment (Development Certification and Fire Safety) Regulation 2021

Section 1: Type of statement

This is (mark applicable box): 📝 an annual fire safety statement (complete the declaration at Section 8 of this form)

a supplementary fire safety statement (complete the declaration at Section 9 of this form)

Section 2: Description of the building or part of the building

This statement applies to: \checkmark the whole building \Box part of the building

Address (Street No., Street Name, Suburb and Postcode)

15 RODBOROUGH ROAD, FRENCHS FOREST NSW 2086

Lot No. (if known)	DP/SP (if known)	Building Name (if applicable)
SP70885		SP70885 (STRATAONE) 15 RODBOROUGH ROAD, FRENCHS FOREST

Provide a brief description of the building or part (building use, number of storeys, construction type etc)

PART: WHOLE BUILDING BUILDING USE: CLASS 5 CONSTRUCTION TYPE: UNKNOWN STORIES ABOVE GROUND: 3 STORIES BELOW GROUND: 0

Section 3: Name and address of the owner(s) of the building or part of the building

Full Name (Given Name/s and Family Name) *

THE OWNERS CORPORATION SP 70885 C/- STRATAONE

* Where the owner is not a person/s but an entity including a company or trust insert the full name of that entity.

Address (Street No., Street Name, Suburb and Postcode)

PO BOX 889 NARRABEEN NSW 2101

Section 4: Fire safety measures

Fire safety measure	Minimum standard of performance	Date(s) assessed	APFS*
EMERGENCY LIGHTING	BCA E4.2, E4.4, AS 2293.1-1998	17/08/2023	F020983A
EXIT SIGNS	SIGNS BCA E4.5, E4.6, E4.8 AS2293.1-1998		F020983A
FIRE BLANKETS	AS 2444-2001	17/08/2023	F020983A
FIRE DOORS	BCA C3.2, C3.4, AS 1905.1-1997	17/08/2023	F020983A
FIRE HOSE REEL SYSTEMS	BCA E1.4, AS 2441-1988	17/08/2023	F020983A
FIRE HYDRANT SYSTEMS	BCA E1.3, AS 2419.1-1994	17/08/2023	F020983A
PORTABLE FIRE EXTINGUISHERS	BCA E1.6, AS 2444-2001	17/08/2023	F020983A

* See notes on page 4 about how to correctly identify an accredited practitioner (fire safety) (APFS). Also, new rows can be added if required.

Section 5: Inspection of fire exits and paths of travel to fire exits (Part 15)

Part of the building inspected	Date(s) Inspected	APFS*
PATH OF TRAVEL & DISCHARGE TO EXIT - WHOLE BUILDING	17/08/2023	F020983A

* See notes on page 4 about how to correctly identify an accredited practitioner (fire safety) (APFS). Also, new rows can be added if required.



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Section 6: Name and contact details	s of each accredited prac	titioner (fire saf	ety) (APFS)*		
Full name (Given Name/s and Family Name)	Address	Phone	APFS*	Signature	
STEWART MCINTOSH	Unit 11, 26 Terrace Road, North Richmond, NSW 2754	1300 234737	F020983A	15th	
Where applicable - see notes on page 4 for further infor	mation.				
Section 7: Details of the person mal	king the declaration in sec	ction 8 or 9 #			
Full name (Given Name/s and Family Name)					
Peter Brisbane					
Organisation (if applicable)	Titl	e/Position (if applica	able)		
strata One Pty Ltd		Director			
Address (Street No, Street Name, Suburb an	d Postcode)				
suite 8. 12 Rickard Road Narrabed					
Phone	Em	ail			
(02) 9913 3999			ice@strataone.com.au		
# The person making the declaration in section 8 or 9 mu		•			
 a) each essential fire safety measure specific performing: for an essential fire safety measure site ii. for an essential fire safety measure a which the measure was originally detected by an account disclose grounds for a prosecution un Owner/Agent Signature 	specified in the fire safety schedu applicable to the building but not signed and implemented, and scredited practitioner (fire safety) ander Part 15 of the Regulation.	ile, to a standard no specified in the safe and was found, wh Date iss	less than that speciety schedule, to a state in it was inspected,	fied in the schedule, or andard no less than that to	
Section 9: Supplementary fire safety					
l,	(insert full r	name) being the	e: 🗌 owner 🗌 ov	vner's agent	
declare that each critical fire safety measure s performing to at least the standard required b			accredited practition	ner (fire safety) as capable of	
Owner/Agent Signature		Date iss	ued		

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Note:

- A fire safety statement for a building must not be issued unless the statement is accompanied by a fire safety schedule for the building in accordance with the Regulation.
- The building owner(s) are also responsible for ensuring that essential fire safety measures are maintained in accordance with section 81 of the Regulation. An agent cannot be made responsible for this requirement.