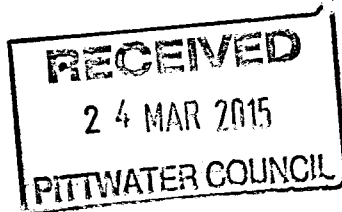
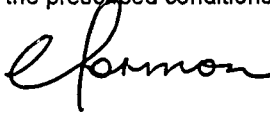


20/3/15



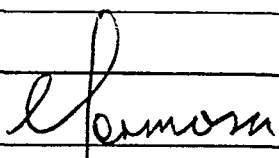
## FINAL OCCUPATION CERTIFICATE

|  |   |                   |              |
|--|---|-------------------|--------------|
| Date Application Received  | 19-02-14  |                   |              |
| Council  | Pittwater Council   | CDC Number        | 2014/036     |
| Occupation Certificate No.   | 2015-069  | Date Approved     | 20/03/15     |
| Certifying Authority   | Craig Formosa   |                   |              |
| Accredited Certifier   | Craig Formosa   | Accreditation No. | BPB0124      |
| Accreditation Body   | Building Professionals Board  |                   |              |
| <b>APPLICANT DETAILS</b>   |   |                   |              |
| Name   | Geoff White   | Ph No.            | 0411 740 500 |
| Address  | 17 Alexandra Crescent, Bayview NSW 2104   |                   |              |
| <b>OWNER DETAILS</b>   |   |                   |              |
| Name   | Geoff White & Juliette Georginis  |                   |              |
| Address  | 17 Alexandra Crescent, Bayview, NSW 2104  |                   |              |
| <b>DEVELOPMENT DETAILS</b>   |   |                   |              |
| Subject Land   | 17 Alexandra Crescent, Bayview  | Lot No.           | B DP 33460   |
| Description of Development   | Alterations & additions to an existing dwelling   |                   |              |
| Class of Building  | 1a, 10a   | Value of Work     | \$200,000.00 |
| <b>THE BUILDING IS SUITABLE FOR OCCUPATION</b>   |   |                   |              |
| Certificates Attached  | Mandatory Inspection Reports, Basix Completion Receipt, Geotechnical Engineers Form 3, Structural Engineer, Plumber, Smoke detector, Waterproofing, Termite protection, Glazing |                   |              |
| <b>RECORD OF INSPECTIONS</b>   |   |                   |              |
| Site Inspection prior to issue of Complying Development Certificate  | 21/02/14  |                   |              |
| Footings/Piers - prior to concrete pour  | 30/04/14  |                   |              |
| Timber Frame - prior to lining   | 24/07/14  |                   |              |
| Slab Steel - prior to concrete pour  | 15/04/14,<br>20/05/14,<br>30/04/14  |                   |              |
| Waterproofing  | 02/10/14,<br>25/09/14   |                   |              |
| Stormwater   | 09/09/14  |                   |              |
| Final Inspection - issue of Occupation Certificate   | 18/03/15  |                   |              |
| <b>NOTIFICATION</b>  |   |                   |              |
| <p>I, Craig Formosa, as the certifying authority am satisfied that;</p> <ul style="list-style-type: none"> <li>(a) the building will not constitute a hazard to the health or safety of the occupants,</li> <li>(b) a current Development Application is in force for the building,</li> <li>(c) a current Complying Development Certificate has been issued for the building in respect to the plans and specifications for the building,</li> <li>(d) the building is suitable for its use under the Building Code of Australia, and</li> <li>(e) all the prescribed conditions of development consent have been satisfied.</li> </ul> <p>Signed:  Date: 20/03/15</p> <p>PCA Accreditation No. BPB0124<br/>Accreditation Body: Building Professionals Board</p> |   |                   |              |

336 REC 376219 24/3/15.

**FORM Building Certifiers Pty Ltd** ABN 76 134 030 710 | PO Box 1824, Dee Why NSW 2099 | T/F +61 2 8021 9313 | info@formbc.com | www.formbc.com

# INSPECTION REPORT 3456

|   |  |                                    |  |   |  |                                |  |
|---|--|------------------------------------|--|---|--|--------------------------------|--|
| <input checked="" type="checkbox"/> Owner   |  | <input type="checkbox"/> Applicant |  | <input type="checkbox"/> Builder  |  | <input type="checkbox"/> Other |  |
| Name <i>White</i>   |  |                                    |  | Tel/Email   |  |                                |  |
| <b>PROPERTY ADDRESS</b>   |  |                                    |  |   |  |                                |  |
| <i>17 Alexander Cres, Bayview</i>   |  |                                    |  |   |  |                                |  |
| <b>INSPECTION TYPE</b>  |  |                                    |  |   |  |                                |  |
| <i>Final</i>  |  |                                    |  |   |  |                                |  |
| <b>INSPECTION OUTCOME</b>   |  |                                    |  |   |  |                                |  |
| <b>Certifier Opinion</b>  |  |                                    |  | <b>Action Required (read with NOTES below)</b>                                  |  |                                |  |
| <input type="checkbox"/> Inspection stage is Satisfactory   |  |                                    |  | <input checked="" type="checkbox"/> NO re-inspection required                   |  |                                |  |
| <input checked="" type="checkbox"/> Inspection stage is Satisfactory subject to Action Required   |  |                                    |  | <input type="checkbox"/> Re-inspection required                                 |  |                                |  |
| <input type="checkbox"/> Inspection stage is Not Satisfactory   |  |                                    |  | <input checked="" type="checkbox"/> Tick if result has also been given verbally |  |                                |  |
| <b>NOTES</b>  |  |                                    |  |   |  |                                |  |
| <p>① Provide temporary balustrade to the temporary stair from driveway to sandstone path.</p> <p>② Provide termite sticker in meter box</p> <p>- OK to issue final occupation certificate for the dwelling CDC upon receipt of photos of the two items listed above.</p> <p>All certificates now received</p> |  |                                    |  |   |  |                                |  |
| <br>Accredited Certifier - BPB <i>0121</i>   |  |                                    |  | <i>18 / 03 / 2015</i><br>Date   |  |                                |  |

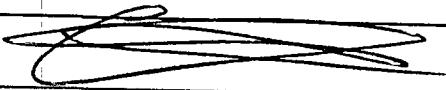
# INSPECTION REPORT 3874

|   |   |
|---|---|
| <input checked="" type="checkbox"/> Owner <input type="checkbox"/> Applicant <input checked="" type="checkbox"/> Builder <input type="checkbox"/> Other _____   |   |
| Name <u>Geoff White</u> Tel/Email _____   |   |
| <b>PROPERTY ADDRESS</b><br><u>17 ALEXANDRA CRESCENT, BAYVIEW</u>  |   |
| <b>INSPECTION TYPE</b><br><u>SLAB STEEL</u>   |   |
| <b>INSPECTION OUTCOME</b>   |   |
| <b>Certifier Opinion</b><br><input checked="" type="checkbox"/> Inspection stage is Satisfactory<br><input type="checkbox"/> Inspection stage is Satisfactory subject to Action Required<br><input type="checkbox"/> Inspection stage is Not Satisfactory   | <b>Action Required (read with NOTES below)</b><br><input type="checkbox"/> NO re-inspection required<br><input type="checkbox"/> Re-inspection required<br><input type="checkbox"/> Tick if result has also been given verbally |
| <b>NOTES</b><br><u>GENERALLY IN ACCORDANCE WITH STRUCTURAL/E DRAWINGS</u><br><u>WATER PROOF MEMBRANE TAPED AT JOINTS</u><br><u>PROVIDE TERMITE COLLARS AROUND PENETRATIONS</u><br><u>STRUCTURAL ENGINEER TO INSPECT</u><br><u>GEOTECHNICAL ENGINEER TO INSPECT</u><br><u>COMPACTED FOUNDATION MATERIAL</u><br><u>CLEAR DEBRIS FROM FOOTINGS PRIOR TO POUR</u><br><u>500mm deep footings</u><br><u>8mm ties at every 300mm</u> |   |
|   |   |
| <div style="display: flex; justify-content: space-between;"> <div> <u>P. Gray</u><br/>           Accredited Certifier - BPB <u>2185</u> </div> <div> <u>15/04/2014</u><br/>           Date         </div> </div>  |   |


**FORM Building Certifiers Pty Ltd** ABN 76 134 030 710 | PO Box 1824, Dee Why NSW 2099 | T/F +61 2 8021 9313 | [info@formbc.com](mailto:info@formbc.com) | [www.formbc.com](http://www.formbc.com)

FORM Building Certifiers Pty Ltd ABN 76 134 030 710 | PO Box 1824, Dee Why NSW 2099 | T/F +61 2 8021 9313 | info@formbc.com | www.formbc.com

# INSPECTION REPORT 5037

|   |  |
|---|--|
| <input type="checkbox"/> Owner <input checked="" type="checkbox"/> Applicant <input type="checkbox"/> Builder <input type="checkbox"/> Other  |  |
| Name <u>CROTHERY WHITE</u>  | Tel/Email  |
| PROPERTY ADDRESS  |  |
| <u>17 ALEXANDER CR, BAYVIEW</u>   |  |
| INSPECTION TYPE   |  |
| <u>FOOTINGS/SLAB</u>  |  |
| INSPECTION OUTCOME  |  |
| Certifier Opinion   | Action Required (read with NOTES below)  |
| <input type="checkbox"/> Inspection stage is Satisfactory<br><input checked="" type="checkbox"/> Inspection stage is Satisfactory subject to Action Required<br><input type="checkbox"/> Inspection stage is Not Satisfactory   | <input checked="" type="checkbox"/> NO re-inspection required<br><input type="checkbox"/> Re-inspection required<br><input type="checkbox"/> Tick if result has also been given verbally |
| NOTES   |  |
| <p>- FOOTINGS EXCAVATED AS PER ENGINEERS SPECIFICATIONS</p> <p>- ANY EXCESS WATER &amp;/OR LOOSE EARTH TO BE REMOVED FROM TRENCHES PRIOR TO PLACEMENT OF CONCRETE</p> <p>- SLAB REINFORCEMENT IN PLACE GENERALLY AS PER ENGINEERS DETAILS.</p> <p>- WHITE ANT PROTECTION TREATMENT APPLIED TO SUBSOIL &amp; PEST CONTROLLER TO ISSUE CERTIFICATE OF COMPLIANCE.</p> <p>- ENGINEER HAS INSPECTED &amp; TO PROVIDE REPORT</p> <p>- GEOTECH ENGINEER HAS INSPECTED FOUNDATION MATERIAL &amp; TO PROVIDE REPORT</p> |  |
|    |  |
| Accredited Certifier - BPB <u>17/4</u>  | Date <u>30/4/2014</u>  |

# INSPECTION REPORT 7291

|   |  |
|---|--|
| <input checked="" type="checkbox"/> Owner <input type="checkbox"/> Applicant <input type="checkbox"/> Builder <input type="checkbox"/> Other _____  |  |
| Name <u>GROFF WHITE</u>   | Tel/Email _____  |
| <b>PROPERTY ADDRESS</b>   |  |
| <u>17 ALEXANDRA CR, BAYVIEW</u>   |  |
| <b>INSPECTION TYPE</b>  |  |
| <u>STORMWATER</u>   |  |
| <b>INSPECTION OUTCOME</b>   |  |
| <b>Certifier Opinion</b>  | <b>Action Required</b> (read with NOTES below)   |
| <input checked="" type="checkbox"/> Inspection stage is Satisfactory<br><input type="checkbox"/> Inspection stage is Satisfactory subject to Action Required<br><input type="checkbox"/> Inspection stage is Not Satisfactory   | <input checked="" type="checkbox"/> NO re-inspection required<br><input type="checkbox"/> Re-inspection required<br><input type="checkbox"/> Tick if result has also been given verbally |
| <b>NOTES</b>  |  |
| <u>- STORMWATER PIPEWORK IN PLACE</u><br><u>- DRAINING TO STREET - COUNCIL'S STORMWATER DRAINAGE SYSTEM</u><br><u>- EXCAVATION OF TRENCH DONE IN A MANNER TO ENSURE NO DAMAGE HAS BEEN DONE TO ROOT SYSTEM OF PROTECTED GUM TREES. ALL DONE AS PER INSTRUCTION OF QUALIFIED ARBORIST</u><br><u>- PLUMBER TO ISSUE CERTIFICATE OF COMPLIANCE</u> |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   |  |
| <br>Accredited Certifier - BPB <u>1714</u>   | <u>9</u> / <u>9</u> / <u>20</u> / <u>14</u><br>Date  |



**FORM Building Certifiers Pty Ltd** ABN 76 134 030 710 | PO Box 1824, Dee Why NSW 2099 | T/F +61 2 8021 9313 | [info@formbc.com](mailto:info@formbc.com) | [www.formbc.com](http://www.formbc.com)

# INSPECTION REPORT 3086

[illegible]

Form Building Certifiers Pty Ltd  
PO Box 1824, DEE WHY NSW 2099  
Phone: 8021 9313 Fax: 8021 9313



## BUILDING INSPECTION RESULT SHEET

REQUESTED INSPECTION TYPE:

Site Inspection ✓

### APPLICATION DETAILS:

|                         |                                |
|-------------------------|--------------------------------|
| Date App. Received:     | 19/2/14                        |
| Property Address:       | 17 Alexander Crescent, Bayview |
| Development Type:       |                                |
| Company Name:           |                                |
| Owners Name & No.:      |                                |
| DA No. (If Applicable): |                                |

### OBSERVATIONS FROM SITE VISIT:

| Application Type   | Possibly CD  | CC only                                  |
|--|--|--|
| Site Access  |  | OK ✓                                     |
| Stormwater Drainage  |  | to street (existing system undetermined) |
| Kerb & Gutter  | ✓  |  |
| Overhead Power Lines   | n/a  |  |
| Easements  | potential sewer ? ✓  |  |
| Tree Removal   | NO   |  |
| Bushfire Hazard  | NO.  |  |
| Flooding   | Likely or not likely?  |  |
| Slope of Block   | significant cross fall from NTH to drive   |  |
| Retaining Walls  | to existing drive  |  |
| Set Backs  | Possibly ?   |  |
| Sewer Mains  |  |  |
| Fire Safety Measures<br>(Class 2-9 Only)   | Fire Hydrant <input type="checkbox"/> Fire Hose Reels <input checked="" type="checkbox"/> Exit Signs <input type="checkbox"/><br>Portable Fire Extinguishers <input checked="" type="checkbox"/> Emergency Lighting <input type="checkbox"/><br>Other <input type="checkbox"/> |  |
| * Do the plans and specifications adequately & accurately depict existing site conditions and/or existing buildings? Yes <input checked="" type="checkbox"/> / No <input type="checkbox"/>                       |  |  |
| * Are there any features of the site or buildings that would mean the development cannot be CD or comply with the BCA? Yes <input type="checkbox"/> / No <input type="checkbox"/><br>If Yes, give details: _____ |  |  |
| Has any building work commenced? Yes <input type="checkbox"/> / No <input type="checkbox"/><br>If Yes, give details: _____   |  |  |

Comments:

needed input required (✓ provided.)

|  |   |
|--|---|
| Name of Certifier & Accreditation Number | Craig Formosa<br>BPB0124<br>Trish Gray<br>BPB2185 |
| Date of Inspection                       | 21/2/14   |

# **CROZIER - Geotechnical Consultants**

*Engineering Geologists & Geotechnical Engineers*

(A Division of PJC Geo-Engineering Pty Ltd)

A.B.N 96 113 453 624

Unit 12 / 42-46 Wattle Road, Brookvale, NSW, 2100.

Phone: 9939-1882 Fax: 9939-1883

Date: 15<sup>th</sup> December 2014

No Page: 1 of 4

Project No.: 2014-043A

The Manager,  
Development Compliance Office  
Pittwater Council  
Mona Vale Customer Service Centre,  
Village Park, 1 Park Street,  
Mona Vale, 2103.

RE: Proposed Alterations and Additions at 17 Alexandra Crescent, Bayview.

Recently we received a request from the Builder to inspect the completed works at the above site. We have inspected the site works during construction and recently on completion and are of the opinion that they were generally carried out in accordance with the recommendations in the Crozier Geotechnical report titled; "Geotechnical Investigation and Risk Assessment for Proposed Alterations and Additions at 17 Alexandra Crescent, Bayview", Project Number: 2014-043, Dated: 24<sup>th</sup> March 2014.

Council's Form: 3 of the Risk Management Policy has been completed and enclosed with this letter. We would suggest that the maintenance schedule as detailed on the attached page and Table: 2 (copies enclosed) be set as minimal requirements for this site.

Hope the above information meets Councils requirements. If we can be of further assistance in regards to this matter please don't hesitate to contact the undersigned.

Yours faithfully,



Peter Crozier  
MSc. MIE Aust. CPEng. NPER.  
Registration Number: 691550.

Attached:

1. Maintenance Schedule.
2. Table: 2 Schedule.
3. Form: 3.

#### **Maintenance Schedule:**

A recommended maintenance program for this site is given in Table: 2 and should also include the following guidelines

- The conditions on the block don't change from those present at the time this report was prepared, except for the changes due to this development.
- There is no change to the property due to an extraordinary event external to this site, and the property is maintained in good order and in accordance with the guidelines set out in;
  - a) CSIRO sheet No. 10-91 1988 and ,
  - b) The Australian Geomechanics article "Geotechnical Risk Associated with Hillside Development" Number10, December 1985, Australian Geomechanics Society, March 2007, Titled "Landslide Risk Management" in the Journal and News of the Australian Geomechanics Society, Volume 42, No 1 and,
  - c) Comply with the requirements of AS 2870 – 1996, Australian Standard for Residential Slabs and Footings.

Where changes to site conditions are identified during the maintenance and inspection program, reference should be made to relevant professionals (e.g. structural engineer, geotechnical engineer or Council).

It is assumed that Pittwater Council will carry out regular inspections of the soil slopes, trees, undergrowth on public land and reserve adjacent to the site so as to ensure that stability conditions do not deteriorate with potential increase in risk level to the site. And that individual Government Departments will maintain public utilities in the form of power & phone lines, water mains, gas and sewer lines to ensure they don't leak and increase the local groundwater level, fire or landslide potential.

**TABLE: 2**

**Recommended Maintenance and Inspection Program**

| Structure                          | Maintenance/ Inspection Item   | Frequency  |
|------------------------------------|--|--|
| Stormwater drains,                 | Owners to inspect to ensure that the drains, and pipes are free of debris & sediment build-up. Clear surface grates and litter.  | Every year or following each major rainfall event. |
| Retaining Walls.                   | Owners to inspect walls for deviation from as constructed condition.   | Every two years or following major rainfall event. |
| Large Trees on or adjacent to site | Arborist to check condition of trees and remove branches as required.  | Every five years                                   |
| Slope Stability                    | Hydraulics (stormwater) & Geotechnical Consultants to check on site stability at same time and provide report.<br><br>Owners to inspect after every major storm event. | One year after construction is completed.          |

**N.B.** Provided the above schedule is maintained the design life of the property should conform with Pittwater Councils Risk Management Policy.



**ALTERNATIVE PEST CONTROL**  
**P.O. BOX 4111**  
**NORTH CURL CURL NSW 2099**

**Certificate of Installation in accordance with AS 3660.1-2000**

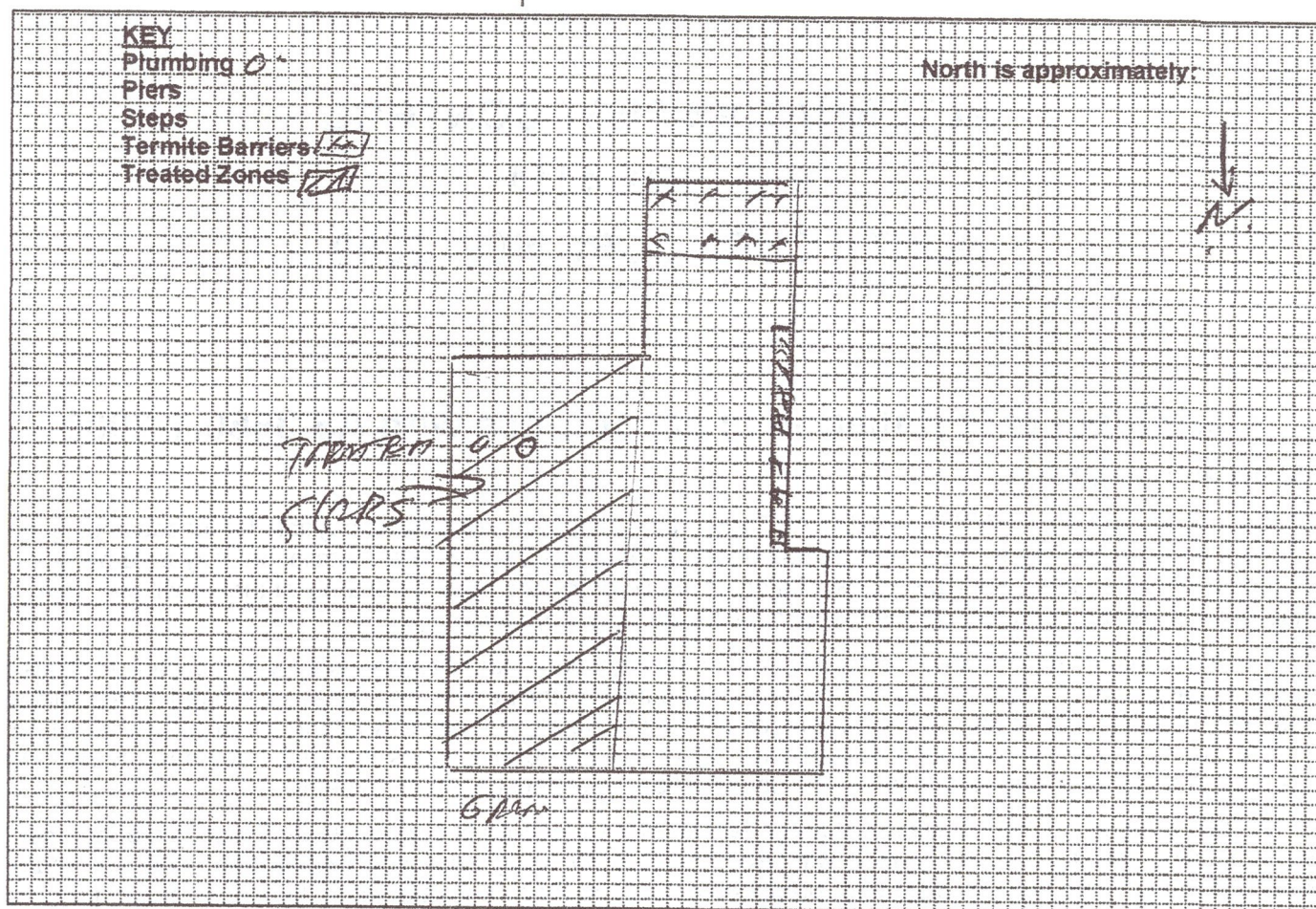
**Terms and Conditions**

**DISCLAIMER OF LIABILITY TO THIRD PARTIES:** - Compensation will only be payable for losses arising in contract or tort sustained by the Client named on the front of this Certificate of Installation. Any third party acting or relying on this Certificate of Installation, in whole or in part, does so entirely at their own risk. This disclaimer does not apply to persons responsible for Building Approvals.

1. Prior to the site being prepared the builder should have ensured that all termite activity found was eradicated in accordance with AS 3660.1-2000. Prior to work commencing, the builder should have arranged for a qualified licensed person to inspect the site to investigate and eradicate all economically important termite nests found. The failure to have this inspection carried out may mean that termite nests may not have been found and eradicated and may still be active under the construction. See clauses 3 and 10 below.
2. The effectiveness of this installation is dependent upon the provision of a complete (full) termite management system being installed in accordance with AS 3660.1-2000 using approved termiticides, systems and/or products. If the system(s) are disturbed, breached or bridged then concealed entry by subterranean termites is possible.
3. No liability is accepted for any failure of a termite management system and this firm warrants only to provide such remedial action as may be necessary during the first 12 months from the date of this Certificate. No such warranty is provided if there are limitations listed on this Certificate or if the system is an incomplete barrier or treated zone or if the builder has not arranged for the termite eradication in clause 1 above.
4. The barrier(s) and/or treated zone(s) installed, as detailed on this Certificate and in the diagram, provide a barrier against subterranean termites only. The barrier or treated zone is not a barrier against any other pest(s) and in particular does not provide any barrier against "drywood (KALOTERMITIDAE) or dampwood termites.
5. **No responsibility is accepted, or warranty implied, for any termite damage that may occur as the result of termite activity, either past, current or in the future.**
6. The termite management system(s) can be rendered ineffective due to building alterations, renovations, additions (pergolas, awnings, verandas etc), introducing infested materials, timber offcuts, wood chips and formwork left on site, materials stored against the building. External barriers and/or treated zones can be destroyed by the installation of lawns, gardens, pathways, landscaping etc adjacent to the building. When making such changes you should first contact this firm. Where such changes are made a further termite barrier installation and/or treated zone is essential.
7. When installing paths, lawn, gardens etc it is very important not to cover air vents or weep holes. If the slab edge is exposed by 75 mm to form part of the termite management system then it is equally important not to cover the slab edge unless another form of barrier and/or treated zone is installed. Again contact this firm before carrying out any such covering. Where such changes are made a further termite barrier and/or treated zone installation is essential.



Diagram (not to scale) showing the location of the installed Termite Management System(s).  
The direction of North is indicated by the ↑ symbol.



It is very important that the Termite Barrier and/or Treated Zone is not bridged or breached. This can happen when installing garden beds, lawn or other landscaping or building works. You should contact this firm prior to carrying out any such work. DO NOT disturb the treated areas in any way.

**Frequent inspections are very important.** Termite Management Systems do not kill off or stop termites. The barriers and treated zones are installed to prevent concealed access only. The barriers and/or treated zones are designed to force the termites into the open. Thus the mud tubes that they use to gain access may be seen during inspections. For this reason such inspections should be carried out at least annually. A Termite treatment in accordance with AS 3660.2-2000 can then be carried out to eradicate the termites.

If you become aware of any activity **do not disturb the termites** in any way. You should notify this firm as soon as possible. Please contact us if ever you have any concerns about Termites or the effectiveness of the Termite Management System(s) installed.

Installation Firm: Alternative Pest Control

Name of Installer: Michael Sparozvich

Firm's Address: 39 Headland Road North Curl Curl

Installer's Licence No.: 3234

Insurance Termite Accreditation No.: 02387

Signature: 

Telephone: 0409749778 Date: 19/05/2014



## Certificate of Installation in accordance with AS 3660.1-2000 - New Construction

Name of owner/builder: Chippchase Building Services

Nº: 538

Property Address: 17 Alexandra Crescent Bayview

State: NSW

Post Code 2104

### The Termite Management System(s) Installed:

Note: The term treated zone used in this document refers to liquid termiticides when used to form part of a termite management system(s) referred to in AS3660.1-2000 as "Termite Barrier Systems".

### AS 3660.1 Termite work: Repellent-Liquid Termiticide Treated Zone and

A Liquid Termiticide Barrier was installed to the following area(s) Subfloor using the liquid termiticide(s) Bi-Flex which contain the active constituent(s) Bifenthrin. The concentration of the liquid termiticide/s spray mixture used was 1% and the total volume used was 150 Lt.

No other System was installed in the following area(s) using . The method(s) of installation was

The above system(s) are not integrated with each other.

The system(s) are not integrated with the concrete poured by the builder to form the termite barrier.

**The resulting Single termite management system(s) is a complete barrier or zone, if the barrier or zone is not complete further work may be required as partial barriers and/or treated zones are not effective and may allow undetected Termite entry. You should consult with the builder. See the limitations below.**

The Termite Management System were installed on the 19<sup>th</sup> day of May 2014 and a durable notice was placed in Meter Box.

A qualified Timber Pest Inspector should inspect the building and its surrounds at least every twelve (12) months.

**It is strongly recommended by the Australian Standard AS 3660.2 that more frequent inspections (3 to 6 monthly) should be carried out.**

We recommend an inspection prior to the installation of gardens, paths, lawns and other landscaping and again on completion of this work to ensure that this work does not breach any termite management system installed or allow concealed termite entry to the property.

**We recommend an inspection of the building and the surrounds every 12 Months.**

Termiticide Liquid Barriers and/or treated zones degrade (break down) over time and should be replenished in the future. After one of the required regular inspections of the property, the inspector may advise you of the need to re-install the Treated Zone or Liquid Termiticide Barrier.

If the above barrier(s) and/or treated zone(s) is/are integrated with the concrete then the concrete forms an integral part of the termite management system to this structure. In this case, the Builder should be asked for a Certificate from the concrete firm that the concrete has been poured in accordance with AS 3600 or AS2870-1996 and amendments.

**Terms and Conditions on Page 1 and important information on page 2 form an important part of this Certificate.**

**Limitations that apply to the above installation are: Existing building not treated.**

8. Do not use untreated timbers for garden edges or retaining walls. Untreated timber attracts termites.
9. Good ventilation and drainage are important, as poor ventilation and drainage greatly increases the risk of termite attack.
10. This firm takes NO RESPONSIBILITY for the concealed entry by termites resulting from poor building design or poor building practices.
- 11. It is the building owner's responsibility to ensure that the inspections, recommended in AS 3660.2-2000, are performed. Please contact this firm.**

#### **VERY IMPORTANT**

If you become aware of the presence of termites within the grounds or on or within the building you should contact this firm or another termite management firm immediately. You should also notify this firm if you become aware that the installed barrier and/or treated zone has been breached or bridged in any way.

The Australian Standard recommends that inspections be carried out by a suitably qualified person, at intervals no greater than 12 months and where timber pest "pressure" is greater, this interval should be shortened. Inspections WILL NOT stop infestation of timber pests; however, the damage which may be caused will be reduced when the infestation is found at an early stage. Termites can build around termite management systems; but can be detected during the recommended inspections.

Modern termiticides have a limited life expectancy. The liquid termiticide barrier and/or treated zones will need to be re-installed. The timing can only be determined by regular, competent inspections as recommended by AS 3660.2-2000 and carried out by a qualified experienced termite inspector competent in Unit 8 "Inspect and Report on Timber Pests" & Unit 10 "Control Timber Pests" of the National Pest Management Competency Standards or equivalent.

**IMPORTANT INFORMATION:** Termite management systems installed during construction of the building are designed to discourage termites from gaining concealed entry to the property. Termite management systems may be bridged by termites, however the evidence of the termite entry will normally be evident to the inspector. A treatment in accordance with AS 3660.2-2000 to eradicate such an infestation will be required.



**CROZIER - Geotechnical Consultants**  
**Engineering Geologists & Geotechnical Engineers**

*Crozier Geotechnical Consultants*  
Unit 12/42-46 Wattle Road  
Brookvale NSW 2100  
*Crozier Geotechnical Consultants is a division of PJC Geo-Engineering Pty Ltd*

ABN: 96 113 453 624  
Phone: (02) 9939 1882  
Fax: (02) 9939 1883

Date: 25<sup>th</sup> February 2015

**Site Inspection**

|   |  |
|---|--|
| <b>To:</b> Mr. Geoff White  | <b>From:</b> James Butcher   |
| <b>E-mail:</b> <a href="mailto:geoffskyworks@bigpond.com">geoffskyworks@bigpond.com</a> | <b>Project No:</b> 2014-043.1  |
| <b>Re:</b> 17 Alexandra Crescent, Bayview   | <b>No. of Pages:</b> 1   |
| <b>CC:</b> Craig Formosa  | <b>Email:</b> <a href="mailto:craig@formbc.com">craig@formbc.com</a> |

**Comments:** Site inspection and testing of excavated foundations for new retaining wall

Geoff,

Inspection and testing was carried out at the above site on 19/02/2015 by a Geotechnical Engineer.

Previous geotechnical site investigation and reporting has been carried out at the above site (Project No. 2014-043) for proposed alterations and additions to the existing house. Those works are now mainly complete. A new retaining wall is under construction at the front of the house along the western side of the existing driveway which forms part of this development.

A strip footing for the new retaining wall along the western side of the driveway had been excavated at the time of inspection. Previously a brick and concrete retaining wall had extended along the driveway edge supporting a gentle grass slope approximately 1.20m to 1.30m above the driveway level. This wall had some minor rotation/movement when it was inspected in March 2014 and it has now been demolished.

The footing excavation was carried out vertically below the driveway edge and edge of the grassed area. The base of the footing was generally 0.40m deep below the driveway edge and 1.20m to 1.30m below the higher grass slope on its western side. The western excavation edge exposed topsoil to 0.30m depth underlain by residual clay to 0.80m with very low strength, highly weathered sandstone bedrock to 1.30m. The bedrock was generally very low to low strength along the footing base with some isolated areas of higher strength, iron rich bedrock. The strip footing base was assessed using a metal bar to determine rock strength.

The wall footing had steel reinforcement in its base in an 'L' shaped manner with vertical reinforcement extending up along its western side. The footing was 0.75m wide at its northern end and 1.0m at its southern end. This appeared to be generally in line with the structural drawings provided (Jack Hodgson Consultants Pty. Ltd., Job No. 29773, Drawing No. C1, Dated: 13 November 2014). These drawings provide no information about foundation requirements however the bedrock exposed at the base of the footing was of at least very low strength and would be suitable for an allowable bearing capacity of 800kPa. At the southern end the footing adjoins a concrete pier which supports a metal post at the front of the house.

Hope the above comments meet your present needs, should you require clarification on any of the above detail or any further advice please don't hesitate to contact the undersigned.

Regards,

James Butcher  
Geotechnical Engineer

*Project No: 2014-043.1 Bayview, , February 2015*

# BASIX Completion Receipt

Receipt no.: CR-1426827203971-A180790

This receipt is confirmation that the certifying authority identified below has satisfied the requirements of clause 154C of the Environmental Planning and Assessment Regulation 2000 for the development described in the 'BASIX Certificate details' section below.

Director-General  
Date of issue: Friday, 20/03/2015



Planning &  
Infrastructure

## Principal certifying authority

Name: Craig  
Accreditation scheme: BPB  
Accreditation number: 0124

## Final Inspection

Date of final inspection: Thursday, 19/03/2015

## BASIX Certificate details

|                       |                       |
|-----------------------|-----------------------|
| BASIX Certificate no. | A180790               |
| Project name          | White-Georginis House |
| Street address        | 17 Alexandra Crescent |
| Suburb                | Bayview               |
| Postcode              | 2104                  |
| Local Government Area | Pittwater Council     |



Peter Roberts Plumbing P/L

4/228 Condamine Street

Manly Vale 2093

Lic. Number 4524

6<sup>th</sup> March 2015

Mr Geoff White

17 Alexander Crescent

Bayview NSW

This is certifying that all Plumbing, Draining & Gas Fitting works completed at the above address have been completed as per Australian Standards.

Connect Water Gas & Sewer to property.

Run Storm Water, Drainage from House to Curb.

Thanking you

A handwritten signature in black ink, appearing to be 'Peter Roberts', written in a cursive style.

Peter Roberts



## GO LOCAL ELECTRICAL PTY LTD

P.O. Box 1118 Mona Vale NSW 2103

Phone: 0418 411 931

ABN: 31 079 902 819

6th March, 2015

To Whom It May Concern.

**Re: Installation of Smoke Alarms - 17 Alexandra Cres, Bayview**

This is to certify that 240 volt hard wired smoke detectors have been wired and installed at 17 Alexandra Crescent, Bayview in accordance with Australian standard AS 3786 - 1993.

Signed

A handwritten signature in black ink, appearing to read 'Kev Marr', is located below the 'Signed' text. The signature is fluid and cursive, with a long horizontal stroke extending to the right.

Kev Marr  
Go Local Electrical  
Lic: 24023C

## LICENSEE'S CERTIFICATE OF COMPLIANCE

- for Plumbing and Drainage Work

Serial No D 427984

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

## PROPERTY &amp; OWNER DETAILS

|                             |                  |                                   |                   |
|-----------------------------|------------------|-----------------------------------|-------------------|
| House No<br>1               | Lot No.          | Street<br>Nelson St               | Suburb<br>BAYVIEW |
| Municipality<br>WATER       | Postcode<br>2103 | Nearest Cross Street<br>FERMOY AV |                   |
| Owner's Name<br>J. G. WHITE |                  | Full Address                      |                   |

## LICENSEE'S DETAILS

|                         |  |                                  |
|-------------------------|--|----------------------------------|
| Full Name<br>John Brown | Address for Notices<br>PO Box 337 NEWTON | Phone No.<br>0414 500 700        |
| Licence No.<br>1 9334   | Expiry Date<br>12/12/2015                | Contractors Authority No.<br>N/A |
|                         |  | Expiry Date<br>N/A               |

## WORK OF WATER SUPPLY / METER DETAILS

|                             |                                |           |   |                    |
|-----------------------------|--------------------------------|-----------|---|--------------------|
| Size of Drilling/No.<br>N/A | Size of Pipework Main to Meter | OR        | Main Size-Size of Tee to be cut into Main | Size of Valve      |
| Reference No.<br>N/A        | Size of Meter                  | Meter No. | Drilling Date/Time                        | Office Issued From |

Full Description of Work/Affixed Meter or Return Meter and List the Number of Fittings to be Connected:

- Carry out work of Water supply ☒
- Install/Commission/Maintenance of Thermostatic Mixing Valve ☐
- Draw water from Water Authorities Supply, stand pipe or sell water so drawn ☐
- Install, alter disconnect or remove a meter connected to service pipe ☐
- Install, alter disconnect or remove a backflow prevention device ☐

| Fittings to be Connected | Number Existing | Number Proposed |
|--------------------------|-----------------|-----------------|
| W.C.                     | 3               |                 |
| Basin                    | 2               |                 |
| Bath                     |                 |                 |
| Shower                   | 2               |                 |
| Kitchen                  | 1               |                 |
| Laundry                  | 1               |                 |
| Other                    |                 |                 |

## 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 ☒
- Connection to stormwater system ☐

| Fittings to be Connected | Number Existing | Number Proposed |
|--------------------------|-----------------|-----------------|
| W.C.                     | 3               |                 |
| Basin                    | 2               |                 |
| Bath                     |                 |                 |
| Shower                   | 2               |                 |
| Kitchen                  | 1               |                 |
| Laundry                  | 1               |                 |
| Other (Specify)          |                 |                 |

## SEWERAGE/WATER SERVICE INSPECTION FEE

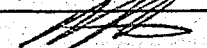
|                     |        |             |                   |             |
|---------------------|--------|-------------|-------------------|-------------|
| Date Fee Paid       | Amount | Receipt No. | Building Fee      | Receipt No. |
|                     | \$     |             | \$                |             |
| Authorising Officer | Office |             | Drainage No./Date |             |
|                     |        |             |                   |             |

|                              |                              |   |
|------------------------------|------------------------------|---|
| Date of Commencement of Work | Estimated Date of Completion | Signature of Licensee   |
| 1.6.15                       | 1.1.15                       |  3.3.15 |

- In respect of authorised work carried out by me at the abovementioned property I certify that:
  - The work has been completed in accordance with the Permit issued, or deemed given by the Local Authority;
  - The work has been installed using only authorised pipes, fittings and fixtures;
  - The completed work has been tested as required by the Local Authority and has passed such tests;
  - In my opinion the work complies with the relevant Local authorities Act, Regulations, By-Laws and Codes of Practice.
  - Meter No. EXISTING that was fixed.
  - The work was completed on ...../...../.....
- If any defect is found in the work carried out by me within a period of twelve (12) months or within the time specified by Local Authorities, from the date of completion, and the Local Authorities Inspector for Plumbing and Drainage certifies that in his opinion the defect is due to faulty workmanship or defective materials, then I undertake to rectify such work at my sole expense, if so directed by the Local Authorities Inspector for any time specified by the Local Authority.

This copy is to be forwarded to the Owner/Agent within 2 working days of being completed.

Signature of Licensee

 1.1.15

# Glass Specialist Sydney Pty Ltd

## Tax Invoice

Invoice No: 005  
Date: 25 November 2014  
Terms: NET 30  
Due Date: 25 December 2014

14 Rossmore Cr Rossmore  
14 Rossmore Cr Rossmore

0452199533  
0452199533  
bruceglassspecialist@gmail.com  
www.glassspecialist.com.au

**Bill To:** Geoff White

| Description   | Quantity | Rate       | Amount     |
|---|----------|------------|------------|
| All glass and glazing installed at 17alexandra cr bay view meets Australian standards<br>ABN:39168483645<br>Glass specialist sydney pty ltd | 1        | \$2,182.00 | \$2,182.00 |

\* Indicates non-taxable item

Any inquiries please call 0452199533

Kind regards bruce

|                    |                   |
|--------------------|-------------------|
| Subtotal           | \$2,182.00        |
| GST (10.00%)       | \$218.20          |
| <b>Total</b>       | <b>\$2,400.20</b> |
| Paid               | \$0.00            |
| <b>Balance Due</b> | <b>\$2,400.20</b> |





AS/NZS 2208 Lic No. BMP553264 & ID5080

Australian / New Zealand Standards



## CERTIFICATE OF CONFORMITY

This Certificate is issued as verification that 10 mm Toughened clear Glass Produced for Art of frameless On Work order 14129 (11 pce for frameless Showers at 17 Alexandra Crescent Bayview NSW 2104) Our Inv 2699 dated 18<sup>th</sup> Nov 2014, is manufactured under the Product Certification Requirements monitored by Benchmark Certification. To ensure that manufacturing process has the capability to consistently produce products in compliance with:

**AS/NZS 2208:1996 – Safety glazing materials in buildings**

**Sunline Glass Pty Ltd**

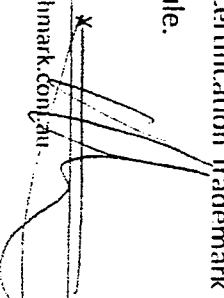
ABN: 76 133 310 620

**Unit 15/71A Milperra Road, Revesby, NSW 2212, AUSTRALIA.**

is authorized to use the Benchmark Certification registered Product Certification Trademark on Products identified in the Certification Schedule.

For and on behalf of Sunline Glass Pty Ltd.

The validity of this certificate can be checked at website: [www.benchmark.com.au](http://www.benchmark.com.au)

  
Michael Gridic  
18/11/14



Trend Windows & Doors Pty Limited  
ABN 96 000 433 492

## COMPLIANCE CERTIFICATE AS2047-1999 & AS1288-2006

10/12/14  
Mr Paul Chipchase  
57A Gardere Avenue  
Curl Curl NSW 2096

**RE: 1194388 Alexandra Cres 17 Bayview**

This is to confirm that the windows and doors supplied by Trend Windows & Doors Pty Limited ("Trend") to the above job were manufactured to comply with AS2047-1999 and glazed in accordance with AS1288-2006 as per details supplied to Trend Windows at the time of order.

Details of any warranty applicable to the above products are available from Trend's website - [www.trendwindows.com.au/terms.html](http://www.trendwindows.com.au/terms.html).

Yours faithfully

A handwritten signature in black ink, appearing to read "MSk", written over a horizontal line.

**Mark Smith**  
Sales Manager

WILKES PTY LTD  
STEPHAN KRENKELS

P.O. Box 264  
Freshwater 2096  
Builders Licence No. 69326C

8th October, 2014

Geoff White,  
17 Alexandra Crescent  
Bayview 2104

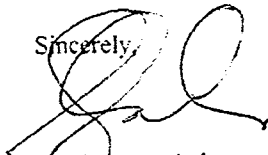
Dear Geoff,

Re: As above.

The waterproofing completed on the new external decks and internal wet areas at the above address was done in accordance with the manufacturers specification, Australian Standard 3740-2010 and the Building Code Of Australia. The product used on the areas was Duram Durabit REO.

The areas are guaranteed not leak for a period of six years from the above date. In the event of a problem, the builder/ owner will be asked to show any areas of breakdown in the materials or faulty workmanship. These areas will be repaired accordingly.

Sincerely,



Stephan Krenkels

Ref: 20130316-c-Final

Tuesday, 10 March 2015

Mr Geoff White  
17 Alexandra Crescent  
BAYVIEW NSW 2104

**Re: 17 Alexandra Crescent, Bayview**

In reply to your recent inquiry, I confirm that the work on alterations and additions to the existing residence at 17 Alexandra Crescent, Bayview was inspected by a representative from this office as work progressed.

I confirm my opinion that the work was carried out generally in accordance with the details shown on Plan Number 20130316-S and the provisions of:

1. Footings and floor slab to garage: AS2870
2. Footings and floor slab to the sub floor area: AS2870
3. Reinforced concrete block retaining wall to sub floor area: AS3700 & AS3600
4. Timber / steel floor frame over garage: AS1720 & AS4100
5. Timber / steel floor frame to master bedroom: AS1720 & AS4100
6. Timber / steel roof frame to master bedroom, family room & new deck:  
AS1720 & AS4100

Please contact me if clarification of this report is required.

Yours faithfully,



**G.W. THITCHENER B.E., M.I.E. Aust.**

PO Box 3586, WAMBERAL NSW 2260

Telephone: (02) 4367 2733 – Facsimile: (02) 4367 2833 – Email: [graeme@thitchener.com.au](mailto:graeme@thitchener.com.au)  
ABN: 36 072 398 030

**GEOTECHNICAL RISK MANAGEMENT POLICY FOR PITTWATER**  
**FORM NO. 3 – Post Construction Geotechnical Certificate to be submitted with**  
**Occupation Certificate or Subdivision Certificate**

|   |                         |
|---|-------------------------|
| Development Application for _____                     | Name of Applicant _____ |
| Address of site <u>17 Alexandra Crescent, Bayview</u> |                         |

*Declaration made by geotechnical engineer on completion of the Development*

I, PETER CROZIER on behalf of Crozier Geotechnical Consultants

on this the 15/12/2014

certify that I am a Geotechnical Engineer, Engineering Geologist and/or Coastal Engineer as defined by the Geotechnical Risk Management Policy for Pittwater - 2009. I am authorised by the above organisation/company to issue this document and to certify that the organisation/company has a current professional indemnity policy of at least \$2million. I prepared and/or verified the Geotechnical Report as per Form 1 dated referred to below.

**Geotechnical Report Details:**

|  |
|--|
| Report Title: <u>REPORT ON GEOTECHNICAL INVESTIGATION &amp; RISK ASSESSMENT (PROJECT NO. 2014-043)</u> |
| Report Date: <u>24/03/2014</u>   |
| Author: <u>JAMES BUTCHER/TROY CROZIER</u>  |
| Author's Company/Organisation: <u>CROZIER GEOTECHNICAL CONSULTANTS</u>                                 |


- ☒ I reviewed the original structural design, and where applicable the subsequently amended structural details (below listed) which have been incorporated into the completed project.
- ☒ I have inspected and/or am satisfied that the foundation materials, upon which the structural elements (as detailed in the original and amended structural documents) of the development have been erected, comply with the requirements specified in the Geotechnical Report and the Construction Certificate approved Structural Plans.
- ☒ I have inspected the site during construction and to the best of my knowledge, I am satisfied that the development referred to in the development consent D.A. \_\_\_\_\_ dated \_\_\_\_\_ (Date consent given) \_\_\_\_\_ (D.A.No)

has been constructed in accordance with the intent of the Geotechnical Report, the requirements of the conditions of Development Consent and the Construction Certificate approved Structural Plans relating to the geotechnical issues (including any treatment and/or maintenance plan that may be required to remove risk where reasonable and practical).

I am aware that Pittwater Council require this certificate prior to issuing an occupancy certificate for the development identified above and will rely on this certificate in regard to the development having achieved the "Acceptable Risk Management" criterion defined in the Policy and that reasonable and practical measures have been taken to remove foreseeable risk.

List of all work as executed drawings and Ongoing Maintenance plans relevant to geotechnical risk management.

|  |
|--|
| <u>As per attached letter and Table 2</u>                            |
| <u>Structural Design: Thitchener Consulting, Job No. 20130316-S,</u> |
| <u>Dated: 20/01/14, Dwg. 1 &amp; 2/2, Issue: A</u>                   |

|   |
|---|
| <b>Registered Professional Engineer 691550</b>  |
| <b>Mr Peter Crozier</b>   |
| MIEAust CPEng (Civil / Geotechnical)  |
|  <b>N P E E R</b>                          |
| Signature: <u>[Signature]</u> Date: <u>16/12/2014</u>   |
| Registered on the NPEER in the area of practice of<br><b>Civil / Geotechnical</b><br>National Professional Engineers Register |