

Fire Safety Certificate

Approved under the Environmental Planning and Assessment Regulation 2000.

Version 2.0

Effective from 1 December

How to complete this form

1. Please print in CAPITAL LETTERS.
2. Please complete all relevant sections in full.

Section 1: Type of certificate

This is (mark applicable box) ☐ a final fire safety certificate (complete the declaration at [Section 6](#) of this form)
☐ an interim fire safety certificate (complete the declaration at [Section 7](#) of this form)

Section 2: Building the subject of this certificate

Street No.	Street Name	Suburb	Postcode
52	BUNGAN HEAD ROAD	NEWPORT	2106
Lot No (if known)	DP/SP (if known)	Building Name (if applicable)	

This certificate applies to (mark applicable box) ☒ the whole building
☐ part of the building

Section 3: Description of building or part the subject of this certificate

Storeys above ground in the building (No.)	Storeys below ground in the building (No.)
2	0

If this certificate relates to a part of the building – describe that part and its location in the building

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Uses of building or part the subject to this certificate (e.g. retail, offices, residential, assembly, carparking)

RESIDENTIAL AND CARPARK (GARAGE)

Section 4: Name and address of the owner of the building or part

Title	Given Name/s	Family Name
MS	REBECCA	STEVENS

Street No.	Street Name	Suburb	Postcode
52	BUNGAN HEAD ROAD	NEWPORT	2106

1. All essential fire safety measures for the building must be listed for a final fire safety certificate
2. All essential fire safety measures for the relevant part of the building must be listed for an interim fire safety certificate

Notes

** Date (DD-MM-YYYY) measure was assessed by a properly qualified person



Section 6: Final fire safety certificate declaration

I, [Click here](#) (insert full name)

being the (mark applicable box) ☒ owner

☐ owner's agent

certify that each essential fire safety measure specified in this certificate:

- a) has been assessed by a properly qualified person, and
- b) was found, when it was assessed, to be capable of performing to at least the standard required by the current fire safety schedule for the building for which this certificate is issued.

Owner/Agent Name	Owner/Agent Signature	Date

Section 7: Interim fire safety certificate declaration

I, [Click here](#) (insert full name)

being the (mark applicable box) ☐ owner

☐ owner's agent

certify that each essential fire safety measure specified in this certificate:

- a) has been assessed by a properly qualified person, and
- b) was found, when it was assessed, to be capable of performing to at least the standard required by the current fire safety schedule for the part of the building to which this certificate relates.

Owner/Agent Name	Owner/Agent Signature	Date

Section 8: Owner's authorisation

(To be completed where an agent makes the declaration in Section 6 or Section 7 of this form)

I, being the owner, authorise the agent named in Section 6 or Section 7 to act on my behalf to make the declaration.

Owner's Name	Owner's Signature	Date

Section 9: Contact details of person issuing this certificate

Title	Given Name/s	Family Name
Phone	Email	

Section 10: Fire safety schedule

A current fire safety schedule for the building must be attached to this certificate.