

POSTED
25/2/14



FINAL OCCUPATION CERTIFICATE

Date Application Received	07/04/11				
Council	Pittwater	DA Number	N0690/10 & N0690/10/S96/1		
Occupation Certificate No.	2014-044	Date Approved	25/02/14		
CC No.	2011-101 & 2011 101MOD1	Date Approved	7/4/11 & 23/5/13		
Certifying Authority	Craig Formosa				
Accredited Certifier	Craig Formosa	Accreditation No.	BPB0124		
Accreditation Body	Building Professionals Board				
APPLICANT DETAILS					
Name	Amika Morriss	Contact Number	0423 84907		
Address	48 Nareen Parade, North Narrabeen NSW 2101				
OWNER DETAILS					
Name	Amika Morriss & Jordon Sun				
Address	48 Nareen Parade, North Narrabeen NSW 2101				
DEVELOPMENT DETAILS					
Subject Land	48 Nareen Parade, North Narrabeen NSW 2101	Lot No.	34	DP	11
Description of Development	Alterations & additions to an existing dwelling.				
Class of Building	1a	Value of Work	\$9,375.00		
THE BUILDING IS SUITABLE FOR OCCUPATION					
Certificates Attached	Mandatory Inspection Reports.				
RECORD OF INSPECTIONS					
Footings/Piers – prior to pour					12/04/11
Timber Frame – prior to lining					31/5/11
Final Inspection – issue of Occupation Certificate					30/11/11
CERTIFICATION					
I, Craig Formosa, as the certifying authority am satisfied that;					
(a) the building will not constitute a hazard to the health or safety of the occupants,					
(b) a current Development Application is in force for the building,					
(c) a current Complying Development Certificate OR Construction Certificate has been issued for the building in respect to the plans and specifications for the building,					
(d) the building is suitable for its use under the Building Code of Australia, and					
(e) all the prescribed conditions of development consent have been satisfied.					
Signed:					Date: 25/02/14
PCA Accreditation No. BPB0124 Accreditation Body: Building Professionals Board					



\$36 Rec. 357768 11/3/14

INSPECTION REPORT

<input checked="" type="checkbox"/> Owner <input type="checkbox"/> Applicant <input type="checkbox"/> Builder <input type="checkbox"/> Other _____	
Name <u>Amika Morriss</u>	Tel _____
PREMISES	
<u>48 Nareer Pde, Nth Narrabeen.</u>	
INSPECTION TYPE(S)	
<input type="checkbox"/> Commence Work <input type="checkbox"/> Framework <input checked="" type="checkbox"/> Completion/Final <input type="checkbox"/> _____	<input type="checkbox"/> Footings <input type="checkbox"/> Waterproof Wet Area <input type="checkbox"/> Roof Frame <input type="checkbox"/> _____
<input type="checkbox"/> Floor Slab/Reo/Membrane <input type="checkbox"/> Stormwater/Drains <input type="checkbox"/> Pool Fence <input type="checkbox"/> _____	
RESULT	
<input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory requires attention as follows and <input checked="" type="checkbox"/> NO reinspection required <input type="checkbox"/> Reinspection required	
①	<u>Provide additional balustrade to far side of upper deck</u> <u>- Provide section 96 Approval from Council due to increased deck size.</u>
②	<u>Provide certificate from electrician for installation of a handrail</u>
And the following if indicated: <input type="checkbox"/> Compliance with condition(s) <input type="checkbox"/> A separate notice/letter will be forwarded in the near future <input type="checkbox"/> Please advise FORM Building Certifiers on completion of work <input type="checkbox"/> The above mentioned work MUST be completed by ____/____/20____ <input type="checkbox"/> The above mentioned work MUST be completed PRIOR to OCCUPATION	
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 40%;"> <u><i>eferrera</i></u> Accredited Certifier </div> <div style="width: 40%; text-align: right;"> <u>30 / 11 / 20 11</u> Date </div> </div>	

INSPECTION REPORT 2392

<input checked="" type="checkbox"/> Owner	<input type="checkbox"/> Applicant	<input type="checkbox"/> Builder	<input type="checkbox"/> Other _____
---	------------------------------------	----------------------------------	--------------------------------------

Name <u>AMIKA MORRIS</u>	Tel _____
--------------------------	-----------

PREMISES

48 NAREEN PDE, Nth NARRABEEN

INSPECTION TYPE(S)

- | | | |
|---|---|---|
| <input type="checkbox"/> Footings/Piers | <input checked="" type="checkbox"/> Frame/Floor | <input type="checkbox"/> Waterproofing |
| <input type="checkbox"/> Slab Reinforcement | <input checked="" type="checkbox"/> Frame/Wall & Roof | <input type="checkbox"/> Final/Interim |
| <input type="checkbox"/> Stormwater | <input type="checkbox"/> Pool Steel | <input type="checkbox"/> Final/Completion |
| <input type="checkbox"/> Complaint | <input type="checkbox"/> Pool Fence | <input type="checkbox"/> _____ |

RESULT

- ☒ Satisfactory
- ☐ Unsatisfactory – requires attention as follows – and ☐ NO reinspection required
- ☐ Reinspection required

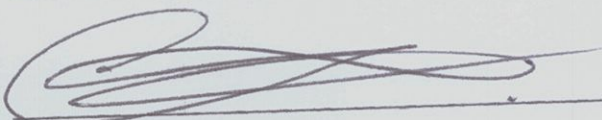
- FLOOR BEARER & JOIST LAYOUT DONE AS PER DETAIL ON APPROVED PLANS. BEARER ADEQUATELY BOLTED TO T/P PINE POSTS & JOIST HANGERS FROM EXS. HWD WHALING PLATE / BEARER

- WALL FRAMING CONSTRUCTED FROM 90x45 H2 T/P TIMBERS W/ DOUBLE BOTTOM PLATES, STUDS @ 450mm c/c & DOUBLE STUDS PROVIDED @ OPENINGS. ADEQUATE ADDL IRON & BRACING TIE DOWNS FROM BOTTOM PLATES TO JOISTS & TOP PLATES TO RATTERS. PLY BRACING IN PLACE ALONG FRONT WALL.

240x45 LVL BEAMS USED FOR HEADS OVER OPENINGS x 3

By signing below I agree to completing the following works listed in this Inspection Report.

Builder/Owner Builder



Accredited Certifier - BPB

_____/_____/20_____
Date

31/5/2011
Date

INSPECTION REPORT

2216

<input checked="" type="checkbox"/> Owner <input type="checkbox"/> Applicant <input type="checkbox"/> Builder <input type="checkbox"/> Other _____			
Name <u>Amaka Morriss</u>		Tel _____	
PREMISES			
<u>48 Nareen Pde, North Narebeem</u>			
INSPECTION TYPE(S)			
<input checked="" type="checkbox"/> Footings/Piers	<input type="checkbox"/> Frame/Floor	<input type="checkbox"/> Waterproofing	
<input type="checkbox"/> Slab Reinforcement	<input type="checkbox"/> Frame/Wall & Roof	<input type="checkbox"/> Final/Interim	
<input type="checkbox"/> Stormwater	<input type="checkbox"/> Pool Steel	<input type="checkbox"/> Final/Completion	
<input type="checkbox"/> Complaint	<input type="checkbox"/> Pool Fence	<input type="checkbox"/> _____	
RESULT			
<input checked="" type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory – requires attention as follows – and <input type="checkbox"/> NO reinspection required <div style="text-align: right;"><input type="checkbox"/> Reinspection required</div>			
<p><u>Due to site constraints the position of the supporting posts have moved which will not provide direct support under external wall of dining room wall. It is recommended that a structural engineer provide direction of resizing joists or intermediate support posts under wall.</u></p>			
<p><u>- Post footings down to solid bearing material.</u></p> <p><u>- remove any loose material prior to pour.</u></p>			
<p>By signing below I agree to completing the following works listed in this Inspection Report.</p>			
_____ Builder/Owner/Builder		_____ / _____ / 20____ Date	
<u><i>Amaka Morriss</i></u> Accredited Certifier - BPB <u>0124</u>		<u>12 / 04 / 20 11</u> Date	