



northern
beaches
council

7 May 2019

Harbord Bowling Club
Lot 4/ Bennett Street
CURL CURL NSW 2096

Dear Sir / Madam

Acknowledgement of submitted Annual Fire Safety Statement
Premises: Lot 4/ Bennett Street CURL CURL NSW 2096
Quote Ref: AFSS00006

Council acknowledges receipt of your Annual Fire Safety Statement for the building located on the above-mentioned property which was submitted on 30 April 2019.

Further to the above, a copy of the Statement together with a copy of the Fire Safety Schedule needs to be provided to the Commissioner of Fire and Rescue NSW. This can be done by completing the appropriate form and forwarding all documents to afss@fire.nsw.gov.au.

A copy of the statement also needs to be displayed in prominent position within the building.

Please note that your next Annual Fire Safety Statement is due on **26 April 2020**.

It is recommended that procedures be put in place to alert the owner well before the due date of the next statement to allow adequate time for the necessary inspection (and any required repairs) to be carried out.

Any requests for an extension of time must be made in writing to Council prior to the due date of the next statement. Forms for this request can be accessed through Council's website www.northernbeaches.nsw.gov.au

Should you require any further information on this matter, please contact Administration Support on **(02) 9970 1173**, or via council@northernbeaches.nsw.gov.au by quoting the AFSS reference number on your statement and in any correspondence to Council.

Yours faithfully

Carl Georgeson
Team Leader Building Control

Fire Safety Statement

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

Note

1. A reference to 'the Regulation' in this statement is a reference to the Environmental Planning and Assessment Regulation 2000
2. A reference to a CFSP in this statement is a reference to a 'competent fire safety practitioner' as defined by clause 167A of the Regulation

Section 1: Type of statement

- This is (mark applicable box) an annual fire safety statement (complete the declaration at [Section 7](#) of this form)
 a supplementary fire safety statement (complete the declaration at [Section 8](#) of this form)

Section 2: Building the subject of this statement

Street No.	Street Name	Suburb	Postcode
4	BENNETT STREET	CURL CURL	2096

Lot No (if known)	DP/SP (if known)	Building Name (if applicable)
		HARBORD BOWLING

- This statement applies to (mark applicable box) the whole building
 part of the building

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

Storeys above ground in the building (No.)	Storeys below ground in the building (No.)
1	

If statement relates to a part – describe that part and its location in the building

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

COMMERCIAL

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

Title	Given Name/s	Family Name

Street No.	Street Name	Suburb	Postcode

Section 5: Fire Safety Measures

1. All essential fire safety measures (including critical fire safety measures) must be listed for an annual fire safety statement
2. Only critical fire safety measures must be listed for a supplementary fire safety statement

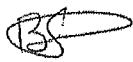
Fire Safety Measure	Date Assessed	CFSP*	Minimum Standard of Performance
EXIT SIGNS	12.03.19	BJ	AS 2293.1 – 1998
EMERGENCY LIGHTING	12.03.19	BJ	AS 2293.1 – 1998
HOSE REEL SYSTEMS	12.03.19	BJ	AS 2441 – 1988
PORTABLE FIRE EXTINGUISHERS	29.03.19	BJ	AS 2444 – 1995
AUTOMATIC FIRE DETECTION & ALARM SYSTEM	12.03.19	BJ	AS 1670 – 1995
FIRE INDICATOR PANEL	12.03.19	BJ	AS 1670.1 - 1995

* Insert initials of CFSP

Section 6: Details of competent fire safety practitioners (CFSPs)

The table must include details of:

1. Each CFSP who endorsed a fire safety measure referred to in Section 5 of this form
2. Each CFSP who inspected the building in accordance with clause 175(b) of the Regulation (In a shaded row)

Initials	Given Name/s	Family Name	Phone	Email	Signature
BJ	Brian	JONES	0299484494	OPERATIONS@ZENITE.COM.AU	
BJ	Brian	JONES	0299484494	OPERATIONS@ZENITE.COM.AU	