NOTICE OF COMMENCMENT AND OF PRINCIPAL **CERTIFYING AUTHORITY**



Suite 2A, 241-245 Pennant Hills Road Carlingford NSW 2118 P:(02) 8860 0038 F:(02) 8860 0032 E: steven@certifiedbuildingspecialists.com.au

1. Details of Appli	cant 7
This Part to be completed by person having ultimate benefit of development consent	Mr Mrs Miss Ms V Other
	Applicant's name: SBA ARCH ITECTS
	Address: SUITE 702, B3 MOUNT ST
	NOCH STONEY State: NEW Post Code: 2060
	Phone: (00 99299988Fax: ()
	Mobile:
	Email: Vesne@sbaarch.com.au
2. Details of the L	and to be Developed
details	Address: 4 2 DAY OFFERT
	WAPPIEWOOD State: NGW Post Code: 2102
	Lot: DP/SP
	Council Area: PITTWIEZ COUNCIL
3. Description of \	33 Mind State Company of the Comp
Provide a description of building works	Describe type of building works:
	OFFICE FITOUT
4. Development	
Provide details of CDC Approval	Complying Development Consent No. CDC2012 - 049
	Date of determination: 17/10/12
5. Appointment of	Principal Certifying Authority
Details of Principal Certifying Authority	Certifying Authority: Steven Saad for Certified Building Specialists
	Accreditation Body: Building Professionals Board
	Phone: (02) 8860 0032 Fax: (02) 8860 0038
	Mobile: 0412 569 763
	Email: steven@certifiedbuildingspecialists.com.au
	Address: Suite 2A 241-245 Pennant Hills Road Carlingford NSW 2118

\$36 Rec. 331016 18/10/12

1 8 OCT 2012 PITTWATER COUNCIL

6. Compliance wit	煙を切っているだけがく こうかいじょう けめい かたさないじゅ トランガン ジェンカン しょうしょ おしゅう ガネンげつ がいちゅん キャンバー・・カー
	Have all conditions required to be satisfied prior to the commencement
Compliance with Development Consent/CDC	of work been satisfied? Yes No No
	(conditions may include the payment of security, section 94 contributions, endorsement
	of building plans by water supply or other authorities)
7. Home Building	Act Requirements
Only complete this section if you are constructing a house, other dwelling or undertaking alterations and additions to a dwelling.	Are you an owner builder? Yes If Yes Permit No.
	Or Will the work be carried out by someone licensed to do so?
	Yes Name of builder:
	Phone: Contractor licence No.
	Attach one of the following documents to this notice:
	a) Evidence that the licensed person is insured to carry out this type of
	work; or
	b) A declaration (signed by each owner of the land) that the reasonable
	market cost of the labour and materials to be used is less than \$12,000
8. Principal Contr	actor Details
A COLUMB TO COLUMB TO THE SECTION OF	The state of the s
Provide details of Principal Contractor of development (required for all projects)	Mr Mrs Miss Ms Other
	Name:
	Company:
	Address:
	State: Post Code:
	Phone: () Fax: ()
	Email:
9. Date of Comme	encement:
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Commencement	Date of work is to commence on: 15/10 / 2012
Date	
10 Principal Certí	fiers Declaration
	Certified Building Specialists acknowledge that they have been
To be completed and signed by PCA	appointed by the applicant to carry out the role of the Principal
	Certifying Authority for this development.
	Certified Building Specialists acknowledge that they have seen evidence
	that the builder is licensed and insured, or have seen evidence that the
	building works to be undertaken by a person with an owner-builder
	permit where required by the Home Building Act.
	Signed.
	Name: Steven Saad
	(on behalf of Certified Building Specialists)
	Date: 17 (0/12

11. Applicant's Declaration

Signed (Applicant(s)):

Vesus, ampal

The applicant, or the applicant's agent must sign this notice Name: VESNA HRIPAC

In what capacity are you signing if you are not the applicant:

Date: /0//0//2

Privacy Policy

The Information you provide in this notice is required under the Environmental Planning and Assessment Act 1979 if you are going to erect a building or carry out subdivision work. If you do not provide the information to the consent authority, you cannot commence the work. The information will be held by the consent authority and by the council (if the council is not the consent authority). Please contact the council if the information you have provided in this notice is incorrect or changes.