



Job No: 2010/387

Tuesday, 26 October 2010

Manly Council
PO Box 82
Manly NSW 1655



Attention: General Manager

RE: Occupation Certificate No. 10/387/01
Frankies Number – Shop 4, 9-15 Central Ave, Manly

Please find attached a copy of Occupation Certificate 10/387/01 and required attachments issued by Steve Watson & Partners for the above mentioned development in accordance with Section 109C(1)(c) and 109H of the Environmental Planning and Assessment Act 1979.

Please find attached a cheque in the amount of \$30.00 payable for the registration of the Occupation Certificate.

Can you please forward SWP a receipt for the acknowledgment of the lodgement cheque.

With regard to the attached certificate please do not hesitate to contact me should you have any queries or require any further information.

Regards,

Nick Hontas
Building Regulations Consultant
Steve Watson & Partners Pty Ltd

CERTIFIER

\$30

R 731104

29.10.10

FINAL OCCUPATION CERTIFICATE



STEVE WATSON
& PARTNERS

BUILDING REGULATIONS CONSULTANTS AND CERTIFIERS
FIRE SAFETY ENGINEERS

LEVEL 5, 432 KENT STREET, SYDNEY NSW 2000
TEL +61 2 9283 6555 | FAX +61 2 9283 8500
sydney@swpartners.com.au
www.swpartners.com.au
ABN 48 102 366 576

Issued under the Environmental Planning and Assessment Act 1979 Section 109C(1)(c) and 109H

Final Occupation Certificate No. 10/387/01

Steve Watson and Partners certify that:

- They have been appointed as the Principal Certifying Authority under section 109E.
- A Development Consent/Complying Development Certificate is in force with respect to the building.
- A Construction Certificate has been issued with respect to the plans and specifications for the building.
- The building is suitable for occupation or use in accordance with its classification under the Building Code of Australia.
- Where required, a Final Fire Safety Certificate has been issued for the building.
- Where required, a report from the Commissioner of Fire Brigades has been considered.

Applicant	Name: Frankies Number Address: Shop 4, 9-15 Central Avenue Suburb: Manly State: NSW Postcode: 2095
Location of the Property	Address: Shop 4, 9-15 Central Avenue Suburb: Manly State: NSW Postcode: 2095 Real Property Description: see attached
Building Description	Internal fitout and use of shop 4 as restaurant
Building Code of Australia Classification	Class 6
Date of Receipt	Date Received: 22nd October 2010
Determination	Approved Date of Determination: 26th October 2010
Complying Development Certificate	Complying Development Certificate Number: 10/387/01 and 10/387/02 Date of Determination: 16th June 2010 and 14th July 2010

Guiseppe Graziano (BPB0144) on behalf of

Steve Watson and Partners

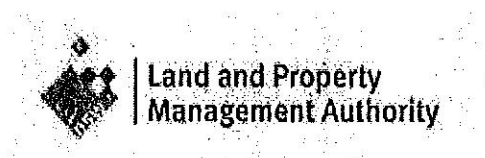
Accreditation Body: **BPB**

Accreditation no: **ABC 1**

Date of Endorsement: **Tuesday, 26 October 2010**

Documentation relied upon to issue Occupation Certificate 10/387/01 for Shop 4, 9-15 Central Avenue Manly

Item No	Description	Date
1	Mandatory inspection record (commencement)	14/05/10
2	Mandatory inspection records (Final)	18/10/10 26/10/10
3	Application for Occupation Certificate	22/10/10
4	Final Fire Safety Certificate	26/10/10
5	Certificates contained within SWP Certification Package	-



Land and Property Information - Street Address Inquiry

Inquiry for address: 15 CENTRAL, MANLY

<u>Address</u>	<u>Title</u>
1-15 CENTRAL AVENUE, MANLY	102/882672
201/9-15 CENTRAL AVENUE, MANLY	1/SP61139
202/9-15 CENTRAL AVENUE, MANLY	2/SP61139
202/9-15 CENTRAL AVENUE, MANLY	3/SP61139
203/9-15 CENTRAL AVENUE, MANLY	4/SP61139
203/9-15 CENTRAL AVENUE, MANLY	5/SP61139
204/9-15 CENTRAL AVENUE, MANLY	6/SP61139
204/9-15 CENTRAL AVENUE, MANLY	7/SP61139
205/9-15 CENTRAL AVENUE, MANLY	8/SP61139
205/9-15 CENTRAL AVENUE, MANLY	9/SP61139
206/9-15 CENTRAL AVENUE, MANLY	10/SP61139
206/9-15 CENTRAL AVENUE, MANLY	11/SP61139
207/9-15 CENTRAL AVENUE, MANLY	12/SP61139
207/9-15 CENTRAL AVENUE, MANLY	13/SP61139
208/9-15 CENTRAL AVENUE, MANLY	14/SP61139
208/9-15 CENTRAL AVENUE, MANLY	15/SP61139
209/9-15 CENTRAL AVENUE, MANLY	16/SP61139
210/9-15 CENTRAL AVENUE, MANLY	17/SP61139
211/9-15 CENTRAL AVENUE, MANLY	18/SP61139
212/9-15 CENTRAL AVENUE, MANLY	19/SP61139
213/9-15 CENTRAL AVENUE, MANLY	20/SP61139
214/9-15 CENTRAL AVENUE, MANLY	21/SP61139
215/9-15 CENTRAL AVENUE, MANLY	22/SP61139
216/9-15 CENTRAL AVENUE, MANLY	23/SP61139
217/9-15 CENTRAL AVENUE, MANLY	24/SP61139
218/9-15 CENTRAL AVENUE, MANLY	25/SP61139
219/9-15 CENTRAL AVENUE, MANLY	26/SP61139
220/9-15 CENTRAL AVENUE, MANLY	27/SP61139
221/9-15 CENTRAL AVENUE, MANLY	28/SP61139
222/9-15 CENTRAL AVENUE, MANLY	29/SP61139
223/9-15 CENTRAL AVENUE, MANLY	30/SP61139
214/9-15 CENTRAL AVENUE, MANLY	31/SP61139
225/9-15 CENTRAL AVENUE, MANLY	32/SP61139

102/882672
10/0382/01

Complying with Departmental Confidentiality
Accredited by the Copyright Commission

226/9-15 CENTRAL AVENUE, MANLY	33/SP61139
227/9-15 CENTRAL AVENUE, MANLY	34/SP61139
228/9-15 CENTRAL AVENUE, MANLY	35/SP61139
219/9-15 CENTRAL AVENUE, MANLY	36/SP61139
230/9-15 CENTRAL AVENUE, MANLY	37/SP61139
231/9-15 CENTRAL AVENUE, MANLY	38/SP61139
232/9-15 CENTRAL AVENUE, MANLY	39/SP61139
233/9-15 CENTRAL AVENUE, MANLY	40/SP61139
234/9-15 CENTRAL AVENUE, MANLY	41/SP61139
235/9-15 CENTRAL AVENUE, MANLY	42/SP61139
236/9-15 CENTRAL AVENUE, MANLY	43/SP61139
301/9-15 CENTRAL AVENUE, MANLY	44/SP61139
301/9-15 CENTRAL AVENUE, MANLY	45/SP61139
302/9-15 CENTRAL AVENUE, MANLY	46/SP61139
302/9-15 CENTRAL AVENUE, MANLY	47/SP61139
303/9-15 CENTRAL AVENUE, MANLY	48/SP61139
303/9-15 CENTRAL AVENUE, MANLY	49/SP61139
304/9-15 CENTRAL AVENUE, MANLY	50/SP61139
304/9-15 CENTRAL AVENUE, MANLY	51/SP61139
305/9-15 CENTRAL AVENUE, MANLY	52/SP61139
305/9-15 CENTRAL AVENUE, MANLY	53/SP61139
306/9-15 CENTRAL AVENUE, MANLY	54/SP61139
306/9-15 CENTRAL AVENUE, MANLY	55/SP61139
307/9-15 CENTRAL AVENUE, MANLY	56/SP61139
307/9-15 CENTRAL AVENUE, MANLY	57/SP61139
308/9-15 CENTRAL AVENUE, MANLY	58/SP61139
308/9-15 CENTRAL AVENUE, MANLY	59/SP61139
309/9-15 CENTRAL AVENUE, MANLY	60/SP61139
309/9-15 CENTRAL AVENUE, MANLY	61/SP61139
310/9-15 CENTRAL AVENUE, MANLY	62/SP61139
310/9-15 CENTRAL AVENUE, MANLY	63/SP61139
311/9-15 CENTRAL AVENUE, MANLY	64/SP61139
312/9-15 CENTRAL AVENUE, MANLY	65/SP61139
313/9-15 CENTRAL AVENUE, MANLY	66/SP61139
314/9-15 CENTRAL AVENUE, MANLY	67/SP61139
315/9-15 CENTRAL AVENUE, MANLY	68/SP61139
401/9-15 CENTRAL AVENUE, MANLY	69/SP61139
410/9-15 CENTRAL AVENUE, MANLY	70/SP61139
402/9-15 CENTRAL AVENUE, MANLY	71/SP61139
402/9-15 CENTRAL AVENUE, MANLY	72/SP61139
403/9-15 CENTRAL AVENUE, MANLY	73/SP61139
403/9-15 CENTRAL AVENUE, MANLY	74/SP61139

STEVE WALSON
E PARTNER

0 / 0387 / 01

Development Certificate
Corporate #ABC1

404/9-15 CENTRAL AVENUE, MANLY	75/SP61139
76/9-15 CENTRAL AVENUE, MANLY	76/SP61139
405/9-15 CENTRAL AVENUE, MANLY	77/SP61139
405/9-15 CENTRAL AVENUE, MANLY	78/SP61139
406/9-15 CENTRAL AVENUE, MANLY	79/SP61139
406/9-15 CENTRAL AVENUE, MANLY	80/SP61139
407/9-15 CENTRAL AVENUE, MANLY	81/SP61139
407/9-15 CENTRAL AVENUE, MANLY	82/SP61139
408/9-15 CENTRAL AVENUE, MANLY	83/SP61139
408/9-15 CENTRAL AVENUE, MANLY	84/SP61139
409/9-15 CENTRAL AVENUE, MANLY	85/SP61139
409/9-15 CENTRAL AVENUE, MANLY	86/SP61139
410/9-15 CENTRAL AVENUE, MANLY	87/SP61139
410/9-15 CENTRAL AVENUE, MANLY	88/SP61139
501/9-15 CENTRAL AVENUE, MANLY	89/SP61139
502/9-15 CENTRAL AVENUE, MANLY	90/SP61139
503/9-15 CENTRAL AVENUE, MANLY	91/SP61139
504/9-15 CENTRAL AVENUE, MANLY	92/SP61139
505/9-15 CENTRAL AVENUE, MANLY	93/SP61139
506/9-15 CENTRAL AVENUE, MANLY	94/SP61139
507/9-15 CENTRAL AVENUE, MANLY	95/SP61139
508/9-15 CENTRAL AVENUE, MANLY	96/SP61139
509/9-15 CENTRAL AVENUE, MANLY	97/SP61139
510/9-15 CENTRAL AVENUE, MANLY	98/SP61139
601/9-15 CENTRAL AVENUE, MANLY	99/SP61139
9-15 CENTRAL AVENUE, MANLY	CP/SP61139
602/9-15 CENTRAL AVENUE, MANLY	100/SP61139
603/9-15 CENTRAL AVENUE, MANLY	101/SP61139
604/9-15 CENTRAL AVENUE, MANLY	102/SP61139
605/9-15 CENTRAL AVENUE, MANLY	103/SP61139
606/9-15 CENTRAL AVENUE, MANLY	104/SP61139
607/9-15 CENTRAL AVENUE, MANLY	105/SP61139
608/9-15 CENTRAL AVENUE, MANLY	106/SP61139
609/9-15 CENTRAL AVENUE, MANLY	107/SP61139
610/9-15 CENTRAL AVENUE, MANLY	108/SP61139
701/9-15 CENTRAL AVENUE, MANLY	109/SP61139
702/9-15 CENTRAL AVENUE, MANLY	110/SP61139
703/9-15 CENTRAL AVENUE, MANLY	111/SP61139
704/9-15 CENTRAL AVENUE, MANLY	112/SP61139
705/9-15 CENTRAL AVENUE, MANLY	113/SP61139
706/9-15 CENTRAL AVENUE, MANLY	114/SP61139
707/9-15 CENTRAL AVENUE, MANLY	115/SP61139

STEVE WALSON
PARTNERS

10/0387/01

Planning Development Certificate
Red Body Corporate (RBC)

708/9-15 CENTRAL AVENUE, MANLY	116/SP61139
801/9-15 CENTRAL AVENUE, MANLY	117/SP61139
802/9-15 CENTRAL AVENUE, MANLY	118/SP61139
803/9-15 CENTRAL AVENUE, MANLY	119/SP61139
804/9-15 CENTRAL AVENUE, MANLY	120/SP61139
805/9-15 CENTRAL AVENUE, MANLY	121/SP61139
806/9-15 CENTRAL AVENUE, MANLY	122/SP61139
807/9-15 CENTRAL AVENUE, MANLY	123/SP61139
808/9-15 CENTRAL AVENUE, MANLY	124/SP61139
1/9-15 CENTRAL AVENUE, MANLY	1/SP61679
2/9-15 CENTRAL AVENUE, MANLY	2/SP61679
3/9-15 CENTRAL AVENUE, MANLY	3/SP61679
4/9-15 CENTRAL AVENUE, MANLY	4/SP61679
5/9-15 CENTRAL AVENUE, MANLY	5/SP61679
6/9-15 CENTRAL AVENUE, MANLY	6/SP61679
7/9-15 CENTRAL AVENUE, MANLY	7/SP61679
8/9-15 CENTRAL AVENUE, MANLY	8/SP61679
9/9-15 CENTRAL AVENUE, MANLY	9/SP61679
10/9-15 CENTRAL AVENUE, MANLY	10/SP61679
11/9-15 CENTRAL AVENUE, MANLY	11/SP61679
12/9-15 CENTRAL AVENUE, MANLY	12/SP61679
13/9-15 CENTRAL AVENUE, MANLY	13/SP61679
14/9-15 CENTRAL AVENUE, MANLY	14/SP61679

*This information is provided as a searching aid only.
The Registrar General does not guarantee the information provided.*

Date of Inquiry: 16 Jun 2010 16:29
Your Reference:

STEVE WATSON
S. P. 11111111

10 / 0387 / 01

Complying Development Certificate
Registered Land Certificate #4401

Inspection Record

CI129C / 143C



STEVE WATSON
& PARTNERS

Project	Shop 4 – 9-15 Central	Inspection record #	10/387/C
Address	Avenue, Manly		
Accredited	Nickolas Hontas	Body Corporate	ABC 1
Certifier	(BPB0832) for Steve Watson and Partners	Accreditation #	
DA ref	N/A	Date of inspection	14 May 2010
		Type	PRE-COMPLYING DEVELOPMENT CERTIFICATE

Checklist

Regulatory requirements	Notes
Date of Application for CDC #	10/06/10
Fire Safety Measures on AFSS/FSS confirmed correct?	Yes
Measures to be affected by the proposed development: 1. Exit signs 2. Emergency lighting 3. Portable fire extinguishers 4. Smoke detection	-
Have works associated with proposed CC/CDC commenced?	No
Do the plans and specifications accompanying the application for the construction certificate adequately and accurately depict the condition of the existing building the subject of the inspection?	Yes
Details of any features of the site, or of any building on the site, that would result in the proposed development the subject of the application for the complying development certificate: (i) not being complying development, or (ii) not complying with the Building Code of Australia	None identified

Signed

14 May 2010

Inspector

Date

BUILDING REGULATIONS CONSULTANTS AND CERTIFIERS
FIRE SAFETY ENGINEERS

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STEVE WATSON
& PARTNERS

10/0387/01

Complying Development Certificate
Accredited Body Corporate ABC1



STEVE WATSON & PARTNERS

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CI162B Site Inspection Record

Project Address Shop 4 – 9-15 Central Avenue, Manly Inspection record # 10/387/F1

Accredited Certifier Guiseppe Graziano (BPB0144) for Steve Watson and Partners Body Corporate Accreditation # ABC 1

DA ref N/A CDC Ref 10/387/01 and 10/387/02

Date of inspection 18th October 2010 Type COMPLETION

Checklist

Consistency with approved plans?	Yes	BCA compliance matters OK?	Yes
Pre OC DA Conditions?	N/A	Basix matters OK?	N/A

Issues/Rectification works required

#	Issue	Comment/ requirement	Action by
1.	Rear exit door was fitted with a drop down bolt which doesn't comply with Clause D2.21 of the BCA	Remove drop down bolt locking device	Builder
2.	No emergency lighting was provided to the tenancy in accordance with E4.2	Provide emergency lighting in accordance with BCA	Electrician

Was the Inspection

- ☐ Satisfactory
☒ Satisfactory subject to resolution of the issues identified above
☐ Unsatisfactory

Signed

18th October 2010

Inspector

Date



STEVE WATSON & PARTNERS

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CI162B Site Inspection Record

Project Address	Shop 4 – 9-15 Central Avenue, Manly	Inspection record #	10/387/F2
Accredited Certifier	Guiseppe Graziano (BPB0144) for Steve Watson and Partners	Body Corporate Accreditation #	ABC 1
DA ref	N/A	CDC Ref	10/387/01 and 10/387/02
Date of inspection	26 th October 2010	Type	COMPLETION – Defects reinspection

Checklist

Consistency with approved plans?	Yes	BCA compliance matters OK?	Yes
Pre OC DA Conditions?	N/A	Basix matters OK?	N/A

Issues/Rectification works required

#	Issue	Comment/ requirement	Action by
1.	Rear exit door was fitted with a drop down bolt which doesn't comply with Clause D2.21 of the BCA	Refer to attached photos	-
2.	No emergency lighting was provided to the tenancy in accordance with E4.2	Refer to attached photos and certification	-

Was the Inspection

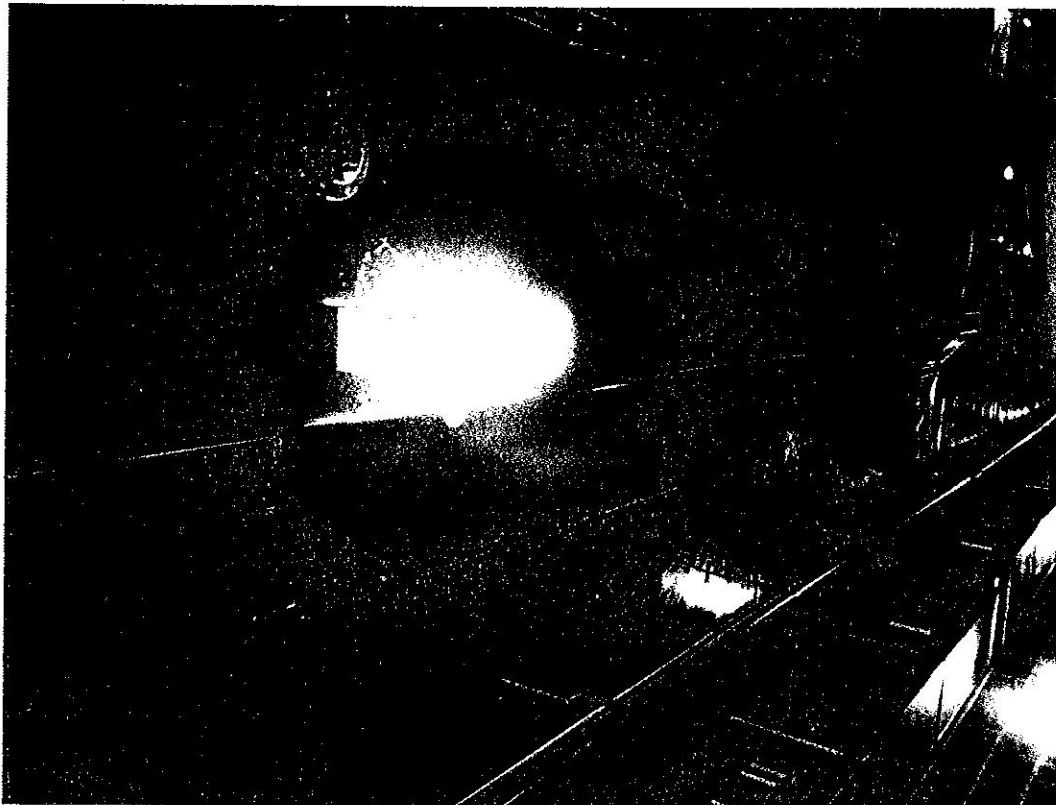
- ☒ Satisfactory
☐ Satisfactory subject to resolution of the issues identified above
☐ Unsatisfactory

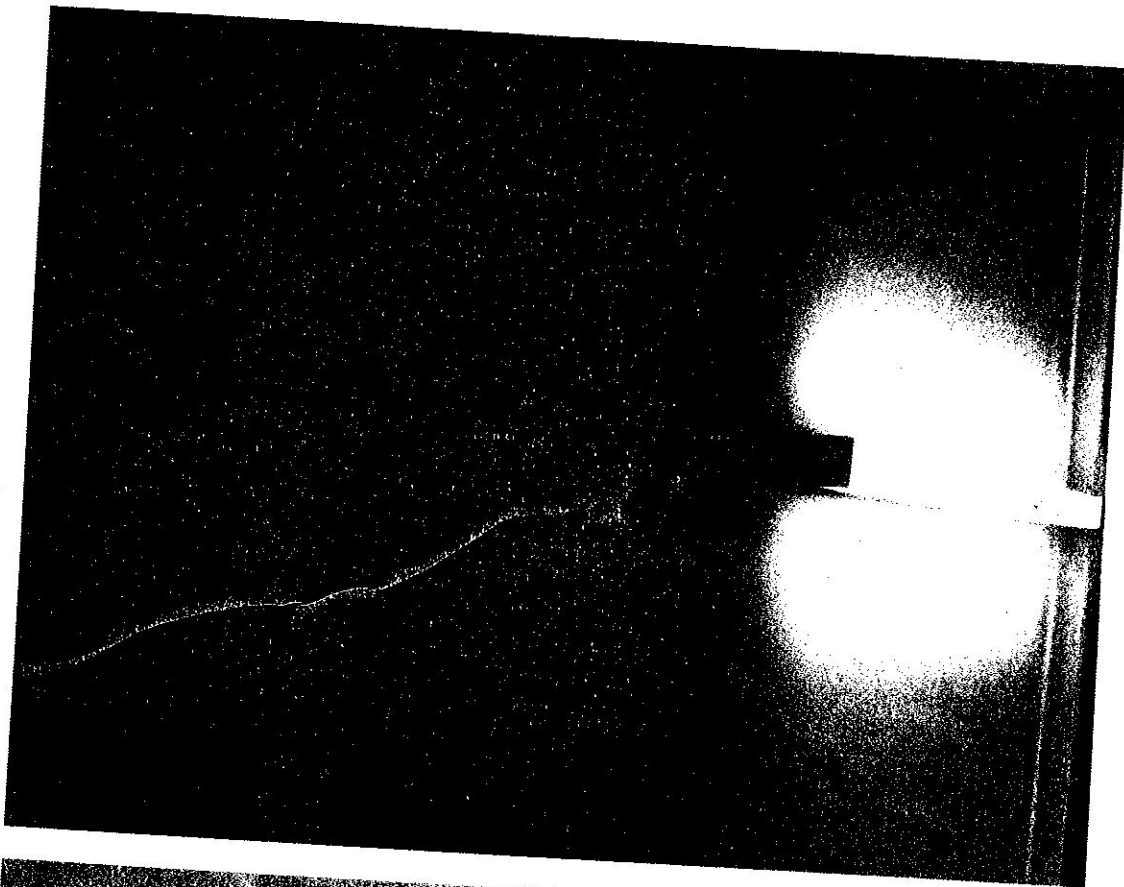
Signed

26th October 2010

Inspector

Date





APPLICATION FOR OCCUPATION CERTIFICATE



STEVE WATSON
& PARTNERS

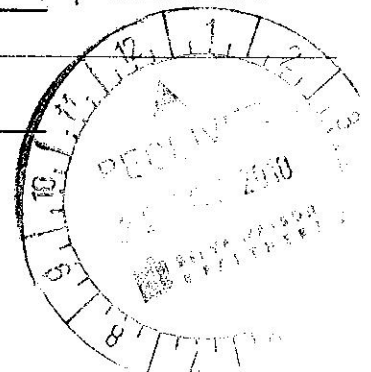
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sydney@swpartners.com.au
www.swpartners.com.au
ABN 46 102 366 573

PART 1 Application and Site Details

Type of Certificate Sought <i>Tick appropriate boxes</i>	☐ Interim certificate ☒ Final certificate ☐ Change of building use of an existing building ☐ Occupation/use of a new building
Applicant <i>It is important that we are able to contact you if we need more information.</i> <i>Please give us as much detail as possible.</i>	Mr ☐ Mrs ☐ Miss ☐ Ms ☐ Other ☒ Partnership Surname (or Company): <u>Frankies Number</u> Given names (or ABN): <u>39069375820</u> Address: <u>Shop 4, 9-15 Central ave</u> <u>Manly</u> State: <u>NSW</u> Post Code: <u>2095</u> Phone: () <u>99766763</u> Fax: () _____ Mobile: <u>0405744215</u> E-mail: <u>sahra@frankies</u> <u>number.com</u>
Location of the Property <i>We need this to correctly identify the land.</i>	Address: <u>Shop 4, 9-15 Central ave, Manly</u> State: <u>NSW</u> Post Code: <u>2095</u> Real Property Description: <u>See attached</u> (eg. Lot/DP/Section, etc) _____ <i>The real property description is mandatory, these details are shown on your rate notices, property deeds etc</i>

PART 2 Work Description

Development Consent or Complying Development Certificate	Development Consent/Complying Development No: <u>10/0387/01 & 10/0387/02</u> Date of Determination: <u>16/06/10 & 14/07/10</u>
Construction Certificate	Construction Certificate No: _____ Date of Determination: <u>N/A</u>



Building Details

The building classification must be the same as that specified in the Complying Development Certificate or Construction Certificate

If you are applying for an Occupation Certificate for part of the building, describe the part of the building:

Internal fitout and use of shop 4 as
restaurant

Describe the proposed use of the building: Restaurant

What is the classification of the building under the BCA: 6

Change in Classification

What is the existing classification of the building under the BCA: N/A

What is the new classification of the building under the BCA: N/A

Attachments

The following information must accompany an application for an Occupation Certificate:

- A copy of Development Consent or Complying Development Certificate
- A copy of the Construction Certificate, where relevant
- A Final Fire Safety Certificate or Interim Fire Safety Certificate (not required for class 1a or 10 buildings).
- Other certificates or documentation relied on.

PART 3 Declaration

Declaration

If the applicant is a company or strata title body corporate, a director or authorised delegate must sign this declaration.

I declare that all the information in the application is, to the best of my knowledge, true and accurate.

I also understand that if the information is incomplete the application may be delayed or rejected or more information may be requested. I acknowledge that if the information provided is misleading, any approval granted 'may be void'.

Signature:

Sahra Roper

Date:

20/10/10

Name, if you are not the applicant:

Sahra Roper

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

Part Partner

Frankies Number

Page 6

FIRE SAFETY CERTIFICATE

The owner of a building, or the owner's agent, needs to provide a fire safety certificate to the certifying authority (a council or a private certifier) with an application for an occupation certificate. You can use this form to do so. A copy of the certificate also needs to be given to the Commissioner of New South Wales Fire Brigades, and displayed in the building in a prominent position.

1. Details of the Building being Certified	
Name of the owner of the building or part of the building	
Full name/company name	SP61679 + 8888882 Building Management
Address of the building	
Flat/street no.	Shop 4, 9-15
Street name	Central Avenue
Suburb or town	Manly
Postcode	2095
Nearest cross street	Sydney Road
This certificate is for: part of building	
Description of the building or part of the building	
Shop 4	
2. Type of Certificate	
This is the: final fire safety certificate	
Date of this certificate	26 October 2010
3. Certification	
I, <u>Sahra Roper</u>	of <u>Frankies Number</u>
being the owner of the building described above, or the agent of the owner, certify that:	
- each of the essential fire safety measures listed in part 7 has been assessed by a properly qualified person, and was found, when it was assessed by that person, to be capable of performing to at least the standard required by the current fire safety schedule for the building; - the information contained in this statement is true and accurate to the best of my knowledge and belief.	
4. Information Attached to this Certificate	
☒ The current fire safety schedule for the building	
5. Signature	
The owner of the building, or the owner's agent, must complete and sign the certificate.	
Signature	<u>Sahra Roper</u>
Name	Sahra Roper
Address	19 Cohen St Fairlight 2094
The capacity in which you are signing if you are not the owner of the building	
The Lessor	

6. Privacy policy

You need to provide the information in this certificate to the certifying authority if you are applying for an occupation certificate. You also need to give the information to the council and the Commissioner of New South Wales Fire Brigades if a fire safety order has been made for the building once you have satisfied that order. If you do not supply a fire safety certificate as required, you will be in breach of the *Environmental Planning and Assessment Act 1979* and you could be found guilty of an offence and/or required to take further action. Please contact the council if the information you have provided in this certificate is incorrect or changes.

7. Assessment of Fire Safety Measures

Measure	Standard of performance required by the fire safety schedule	Date of assessment
Automatic fire detection and alarm system	BCA2010 Specification E2.2a and AS 1670.1 - 2004	8.10.10
Emergency lighting	BCA2010 Clause E4.2, E4.4 and AS 2293.1 - 2005	22.10.10
Exit signs	BCA2010 Clause E4.5, NSW E4.6, E4.8 and AS 2293.1 - 2005	22.10.10
Portable fire extinguishers	BCA2010 Clause E1.6 and AS 2444 - 2001	26.10.10

SWP Certificate Tracking Schedule

Project: Frankies Number, Manly

Date: 26th October 2010

Revision: R1.0

Statutory Fire Safety Measures			CERTIFICATION BY	
ITEM	MEASURE	STANDARD OF PERFORMANCE	DESIGN	INSTALL
1	Automatic fire detection and alarm system	BCA2010 Specification E2.2a and AS 1670.1 - 2004	-	Superior Fire Services Pty Ltd 08/10/10
2	Emergency lighting	BCA2010 Clause E4.2, E4.4 and AS 2293.1 – 2005	-	Steve Harrison Electrical 22/10/10
3	Exit signs	BCA2010 Clause E4.5, NSW E4.6, E4.8 and AS 2293.1 – 2005	-	Steve Harrison Electrical 22/10/10
4	Portable fire extinguishers	BCA2010 Clause E1.6 and AS 2444 – 2001	-	Superior Fire Services Pty Ltd 26/10/10

Other Measures			CERTIFICATION BY	
ITEM	MEASURE	STANDARD OF PERFORMANCE	DESIGN	INSTALL
1	Construction and Fitout of Food Premises	Food Act 2003, Food Regulation 2004 and AS 4674-2004	-	HACCP Australia 21/10/10
2	Energy Efficiency (Artificial Lighting and Power)	BCA2010 Part J6 and Specification J6	-	Steve Harrison Electrical 22/10/10
3	Energy Efficiency (Hot Water Supply)	BCA2008 Part J7 and Section 8 of AS/NZS3500.4	-	Somerville Plumbing Pty Ltd 22/10/10
4	Glazing	Other Glazing AS1288 (including bi-fold doors, revolving doors, skylights, shopfront doors & one off doors)	-	Urban Impact 22/10/10
5	Light (general)	BCA2010 Clause F4.4 and AS 1680.0 – 1998	-	Steve Harrison Electrical 22/10/10
6	Ventilation (general)	BCA2010 Clause NSW F4.5(b) and AS 1668.2 – 1991	-	Total Air Balancing 22/10/10



Superior

Fire Services Pty Ltd

Final / Interim Fire Safety Certificate

Environmental Planning & Assessment Regulation 2000 – Part 8, Division 3

Type of Certificate

Type of certificate issued

☐ Interim

☒ Final

Details of Certificate

Name of Owner / Agent J. Nathaniel Hild

Address Superior Fire Services, C6/15 Narabang Way, Belrose NSW

certify that:

(a) each of the essential fire measures listed below:

- has been assessed by a person (chosen by me) who was properly qualified to do so; and
- was found, when it was assessed to have been properly implemented and to be capable of performing to a standard not less than that required by the most recent fire safety schedule (copy attached) for the building for which the certificate is issued.

(b) the information contained in this certificate is, to the best of my knowledge and belief, true and accurate.

Street Central Ave

Suburb Manly

Side of Street East

Nearest cross street Raglan St

House/Unit number 9-15

Description of the building
(whole or part) Part (Shop 4) Frankie's Number

Date of Assessment

Date of assessment 8.10.2010

Essential Fire Safety Measures

Fire Safety Measure	Standard	BCA Clause(s)
Automatic Fire Detection & Alarm Systems	AS 1670.1 - 2004	Spec E2.2a (Clause 4)
Building Occupant Warning System	AS 1670.1 - 2004	Spec E2.2a (Clause 6)

Date of Certificate

Date of this certificate 26.10.2010

Signature

Agent / Owner's Signature

Capacity Service Supervisor

- A copy of this certificate together with the relevant fire safety schedule must be forwarded to the Council and the Commissioner of the New South Wales Fire Brigades.
- A copy of this certificate together with the relevant fire safety schedule must be prominently displayed in the building.
- A Fire Safety Certificate is a certificate issued by or on behalf of the owner of the building.

APPENDIX E
COMMISSIONING TEST REPORT
(Informative)

THE FIRE DETECTION AND ALARM SYSTEM
INSTALLED AT:

(Premises) *Frankie's Number*
Shop 4, 9-15 Central Ave
Manly

Postcode

Owner or Owner's Authorized Agent

Postcode

NEW*

MODIFICATION TO SYSTEM*

ADDITION TO*

(*Cross out those not applicable)

Date of commissioning tests *8/10/10*

Name and address of commissioning company, company stamp or company (name in 'BLOCK LETTERS')

Superior Fire Services P/L

CG, 15 Warabang Way

Belrose NSW 2085

Postcode

Commissioning person

Name (print) *Nathaniel Hide*

Signature *N Hide*

AS 1670.1--2004

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INSTRUCTIONS:

This form is to be used in conjunction with—

- (a) operator's manual;
- (b) installer's statement(s); and
- (c) 'as-installed' drawings.

to provide a complete description of the installed system and its tested performance at the time of its commissioning into service.

SYSTEM INFORMATION**GENERAL****YES**

- | | |
|--|--|
| (a) <i>Equipment</i> Equipment has been designed and constructed in accordance with the relevant Standards. | ☒ |
| (b) <i>Installation</i> Equipment has been located, installed and interconnected in accordance with the system documentation. | ☒ |
| (c) <i>Compatibility</i> All detectors and other devices used in the system are— | |
| (i) listed in the operator's manual. | ☒ |
| (ii) compatible with the relevant parts of CIE, particularly that the permitted number of detectors and other devices for each circuit is not exceeded. | ☒ |
| (iii) installed in an environment for which they are suitable. | ☒ |
| (iv) not set to a sensitivity outside that prescribed in the relevant product Standard. | ☒ |
| (d) <i>Alarm zone limitations</i> The alarm zone limitations in Clause 2.4 of AS 1670.1 are not exceeded. | ☒ |
| (e) <i>Primary power source</i> | |
| (i) The primary power source for the system has been provided in accordance with AS/NZS 3000. | ☒ |
| (ii) The isolating switch disconnects all active conductors | ☒ |
| (iii) Five operations of the primary power source switch did not cause an alarm to be indicated on the system. | ☒ |
| (f) <i>Secondary power source</i> | |
| (i) The secondary power source is of a suitable type and capacity complying with the requirements of Clause 3.16.2 of AS 1670.1. | ☒ |
| (ii) The float voltage, charger type and setting is correct and in accordance with the battery manufacturer's recommendation. | ☒ |
| (g) <i>Battery temperature and voltage</i> The battery voltage corresponds to that specified by the battery manufacturer for the temperature measured after 24 h quiescent operation. | ☒ |
| (h) <i>Alarm zone parameters</i> Each alarm zone circuit is within the equipment manufacturer's specifications. | ☒ |
| (i) Wire-free alarm zones Wire-free actuating device parameters meet the minimum parameters specified by the manufacturer, including that the receiver responds to signals from an actuating device for alarm, tamper, low standby power signals and gives a fault signal when the supervisory signal condition is absent. | ☐ N/A |

- (j) *Operation of fault and alarm signals* Fault and alarm conditions correctly detect and indicate as the correct alarm zone, operating other required indicators, and operate relevant outputs of the CIE. ☐ N/A
- (k) *Mimic panel* All mimic panels, annunciators, etc., operate correctly. ☐ N/A.
- (l) *Alarm zone controls* Alarm test, fault test, isolate and reset facility of each alarm zone operates correctly. ☒
- (m) *Alarm dependency* Alarm dependency works correctly and does not apply to devices listed in Clause 3.3 of AS 1670.1. ☒
- (n) *CIE response to actuating device operation* Each actuating device has operated when tested with a medium suitable for the device type and the alarm has indicated on the FIP and at the tested device. ☒
- (o) *Fault response time* The response to a fault does not exceed 100 s for each alarm zone circuit. ☒
- (p) *Alarm response time* At least one detector in each alarm zone has been tested and the response to the alarm does not exceed 10 s or the period specified when dependency on more than one alarm signal is used. ☒
- (q) *Supervisory signal response time* At least one supervisory device in each alarm zone circuit has been tested and the response to the supervisory device does not exceed 100 s. ☒
- (r) *Alarm acknowledgment facility* Alarm acknowledgement facilities operate in accordance with the requirements of Clause 3.2 AS 1670.1. ☒
- (s) *Occupant warning system*
- (i) A fault signal is displayed at the CIE when the circuit wiring at the last speaker or sounder is short or open circuited. ☒
- (ii) Each sounder/speaker operates in accordance with the requirements of Clause 3.22 of AS 1670.1 and a record of the sound pressure level has been made. ☒
- (t) The external alarm indication is visible from the main approach to the building. ☒
- (u) *Manual call points*
- (i) Each manual call point operates correctly. ☐ N/A
- (ii) The activation of manual call points do not cause existing detector alarm indications to be extinguished. ☐ N/A.
- (iii) Manual call points are not subject to alarm dependency. ☐ N/A
- (v) *Smoke and fire door release* Each door-release device operates correctly. ☐ N/A.
- (w) *Flame detectors*
- (i) The number and type of flame detectors provide adequate protection for the area. ☐ N/A.
- (ii) There are no 'blind' spots in the area protected. ☐ N/A
- ~~(iii) Detectors are rigidly fixed. ☐ N/A~~
- (iv) Detector lenses are clean and adequately protected from dust and extraneous radiation sources. ☐ N/A
- (v) Detectors respond to a flame or simulated flame source. ☐ N/A.

AS 1670.1—2004

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(x) *Multi-point aspirating smoke detectors*

- (i) Response time of all sampling points meets the requirements of AS 1670.1.
- (ii) Alarm settings and indicators operate correctly.
- (iii) Remote indication of alarm and fault signals operate correctly.
- (iv) Airflow failure indicator operates correctly.
- (v) System (signal) failure indicators operate correctly.
- (vi) Isolate and reset functions operate correctly.
- (vii) Alarm and fault test facilities operate correctly.

☐ ↑☐☐☐☐ N/A☐☐☐ ↓

- (y) *Duct sampling unit* The alarm indicator is clearly visible from a trafficable area and the duct air velocity exceeds the minimum velocity specified for the unit. If not, the measured differential pressure is at least the minimum specified for the unit

- (z) *Ancillary control functions* Each ancillary control function operates with the activation of associated alarm zones.

☒

- (aa) *Alarm signalling equipment* Alarm signalling equipment initiates a fire alarm signal to the monitoring service provider.

☒

- (bb) *Labelling* Alarm zone location is immediately apparent from the alarm zone labelling.

☒**DOCUMENTATION**

The following documentation is located in or adjacent to the FIP

- (a) 'As-installed' drawings.
- (b) CIE documentation required by AS 4428.1 or AS 7240.2.
- (c) Commissioning test report.
- (d) Installer's statement in accordance with Appendix E of AS 1670.1.
- (e) A log complying with the requirements of Clause 7.3 of AS 1670.1.
- (f) Aspirating system design tool calculation.

☐☒☒☒☒☐ N/A

APPENDIX F STANDARD FORM OF INSTALLER'S STATEMENT FOR FIRE ALARM SYSTEM

(Normative)

- 1 Name of premises Frankie's Number
 - 2 Situated at Shop 4 9-15 Central Ave
Manly.
 - 3 I/We have installed in the above premises
an alteration to the system of
a system of Notifier (system sensor)
(Brand name)
 - 4 The system is connected to the Tyco monitoring service provider
 - 5 The system incorporates the following ancillary equipment: Bell
A/c shutdown @ R.P. for
Base building.
 - 6 The quiescent load of ancillary equipment is
 - 7 Primary power voltage and source
 - 8 Secondary battery type and capacity
 - 9 System maintenance agreement details
 - 10 Portion/s of premises not protected by this system
 - 11 I/We hereby certify that:
 - (a) the installation is complete and has been thoroughly tested.
 - (b) the system is installed in accordance with the current requirements of AS 1670.1.
 - (c) the system is installed in accordance with attached design specification*,
Except in regard to the following details*
- which have been approved by N. Hilde (person)
of Superior Fire (organization)

*Strike out the words that are not applicable

Location of fire indicator panel Base Building.

NIA

EMERGENCY LIGHTING - INSTALLATION CERTIFICATE

Project Name	Frankies Number
Address	Shop 4, 9-15 Central Avenue Manly NSW 2095
Part of Building to be certified	Shop 4

I hereby certify that:

- a) The works have been inspected during construction and have been completed in accordance with the nominated Standards of Performance.

Measure and/or system	Standards of Performance
Emergency lighting	BCA2010 Clause E4.2, E4.4 and AS 2293.1 - 2005

- b) I am a properly qualified person and have a good working knowledge of the relevant codes and standards referenced above. (My qualifications and accreditations are listed below)

Relevant qualifications and accreditations: ELECTRICIAN 949380
2 FLOOR 1x KITCHEN

- c) The information contained in this statement is true and accurate to the best of my knowledge.

Name: STEPHEN HARRISON

Company: STEVE HARRISON ELECTRICAL

Address: 27 NARROOY RD NARRABEEN

Phone No. 9913 2931

Fax No. 9913 1033

S. Harrison
Signature

22.10.10
Date

EXIT SIGNS - INSTALLATION CERTIFICATE

Project Name	Frankies Number
Address	Shop 4, 9-15 Central Avenue Manly NSW 2095
Part of Building to be certified	Shop 4

I hereby certify that:

- a) The works have been inspected during construction and have been completed in accordance with the nominated Standards of Performance.

Measure and/or system	Standards of Performance
Exit signs	BCA2010 Clause E4.5, NSW E4.6, E4.8 and AS 2293.1 - 2005

- b) I am a properly qualified person and have a good working knowledge of the relevant codes and standards referenced above. (My qualifications and accreditations are listed below)

Relevant qualifications and accreditations: ELECTRICIAN 949386
INSTALLED AS PER PLAN 3x EXITS + EMERGENCY
TEST SWITCH

- c) The information contained in this statement is true and accurate to the best of my knowledge.

Name: STEPHEN HARRISON
Company: STEVE HARRISON ELECTRICAL
Address: 27 NARROU RD NARRABEEN
Phone No. 99132931 Fax No. 99131033

S. Harrison
Signature

22.10.10
Date



Superior
Fire Protection Pty Ltd

Final Fire Safety Certificate

Environmental Planning & Assessment Regulation 2000 – Part 8, Division 3

Type of Certificate

Type of certificate issued

☐ Interim

☒ Final

Details of Certificate

Name of Owner/Agent I, Nathaniel Hide

Address SUPERIOR FIRE SYSTEMS PTY LTD
C6/15 NARABANG WAY, BELROSE, NSW 2085

certify that:

- (a) each of the essential fire measures listed below:
- has been assessed by a person (chosen by me) who was properly qualified to do so; and
 - was found, when it was assessed to have been properly implemented and to be capable of performing to a standard not less than that required by the most recent fire safety schedule (copy attached) for the building for which the certificate is issued.
- (b) the information contained in this certificate is, to the best of my knowledge and belief, true and accurate.

Building Name Pacific Waves

Nearest cross street Raglan St

House/Unit number Shop 4, 9-15 Central Ave, Manly

Description of the building (whole or part) (part) Frankie's number restaurant

Date of Assessment

Date of assessment 26.10.10

Essential Fire Safety Measures

Fire Safety Measure	Standard	BCA Clause(s)
Portable fire extinguishers	AS 2444 – 1995	E1.5

Date of Certificate

26.10.10

Signature

Agent / Owner's Signature

V. Hilde

Capacity Service Supervisor

- A copy of this certificate together with the relevant fire safety schedule must be forwarded to the Council and the Commissioner of the New South Wales Fire Brigades.
- A copy of this certificate together with the relevant fire safety schedule must be prominently displayed in the building.
- A Fire Safety Certificate is a certificate issued by or on behalf of the owner of the building.

21st October 2010

Dear Sahra,

A site inspection was conducted on 15th October 2010 at Frankies Number located at Shop 4 / 9 - 15 Central Avenue, Manly NSW.

The facility was inspected against Australian Standard 4674-2004 Design, Construction and Fit out of food premises and it meets the standard with an exception of the hand wash basin in the kitchen which needs to be installed prior to commencing operations.

The facility was not operational at the time of the audit so the inspection of storage, preparation and handling of food could not be verified. The construction and materials used on the walls and floors also comply with the AS 4674.

Please find attached the report completed at the time of the audit. You will note that most of the elements on the report were not applicable as the facility was not operational at the time of the audit.

Please let me know if we can be of further assistance to you and if you would like me to have a look at your operations when it's operational.

Regards,



Camila Bridge
Project Manager

HACCP Australia Pty Ltd

FOOD SAFETY AUDIT REPORT

Company Name: Frankies Number

Operations: Cafe / Restaurant – Facility was not operational during the inspection.

Audit Date: 15th October 2010

Site Address: Shop 4/ 9-15 Central Avenue, Manly NSW.

Auditee Reps: Sahra

Auditor Name: Camila Bridge (RABQSA 110861)



RECEIVALS

Food Process	Satisfactory/ Unsatisfactory	CRIT/MAJ/ MIN/OBS	Additional Comments
Records of supplier and product names for all incoming goods.	N/A		
Packaging condition inspected at receipt and recorded.	N/A		
Temperature records of incoming goods available.	N/A		
Records of corrective actions when taken.	N/A		

CRITICAL CONTROL POINT MONITORINGS

Food Process	Satisfactory/ Unsatisfactory	CRIT/MAJ/ MIN/OBS	Additional Comments
Records of product temperatures for all refrigerated storage.	N/A		
Records of corrective actions for product temperatures failures.	N/A		
Effective use of 2 hour, 4 hour rule for potentially hazardous materials. Records available.	N/A		
Records of corrective actions for total process time of potentially hazardous materials (2hr, 4 hr rule)	N/A		
Records available for sanitizing salads.	N/A		
Records of corrective actions for sanitising salads.	N/A		
Records of cooking temperature available (at least 75°C in centre).	N/A		
Records of corrective actions for cooking temperature when required.	N/A		
Records of hot hold temperatures available (hot high risk foods are being held at 60°C or above).	N/A		
Records of corrective actions for hot high risk foods when required.	N/A		
Records of post cook cooling available. Procedures followed.	N/A		
Records of corrective actions for post cook cooling when required.	N/A		
Records of transport condition available for delivery of food products.	N/A		
Records of corrective actions for transport condition if needed.	N/A		
Records of product condition available for delivery of food products.	N/A		
Records of corrective actions for product condition if needed.	N/A		
Records of delivery temperatures available. (Hot meals transported at > 60°C; Chilled food	N/A		

transported at < 5°C)			
Records of corrective actions for delivery temperatures when required.	N/A		

FOOD PROCESS AREAS			
Food Process	Satisfactory/ Unsatisfactory	CRIT/MAJ/ MIN/OBS	Additional Comments
Food cutting boards / utensils are to be separated and colour coded for raw and ready to eat foods	N/A		
Foods handled appropriately.	N/A		
Gloves properly used for raw and cooked products.	N/A		
Food ingredients are free of foreign matter and free from spoilage.	N/A		
Materials returned to safe storage conditions immediately after use.	N/A		
Correct storage of raw and RTE products avoiding cross contamination.	N/A		
Single service utensils / containers, properly stored.	N/A		
Conformance to shelf life controls and appropriate system for management, e.g. FIFO – All Areas.	N/A		

STORAGE: DRY GOODS			
Food Process	Satisfactory/ Unsatisfactory	CRIT/MAJ/ MIN/OBS	Additional Comments
Goods stored off the floor.	N/A		
Opened items stored so that the product is effectively sealed.	N/A		
Products which have been decanted from its original packaging have been labelled appropriately.	N/A		
Allergen products have been stored appropriately.	N/A		
Products in glass bottles have been stored appropriately to minimise glass contamination in the event of breakage.	N/A		

STORAGE: COLD & HOT			
Food Process	Satisfactory/ Unsatisfactory	CRIT/MAJ/ MIN/OBS	Additional Comments
Food products are stored off the floor at all times.	N/A		
Raw foods stored separately from ready to eat foods.	N/A		
Foods covered & protected appropriately.	N/A		
Decanted and pre-prepared products are labelled with product names and preparation date.	N/A		
Allergen products have been stored appropriately.	N/A		
Products in glass bottles have been stored appropriately to minimise glass contamination in the event of breakage.	N/A		

STORAGE: CLEANING			
-------------------	--	--	--

Food Process	Satisfactory/ Unsatisfactory	CRIT/MAJ/ MIN/OBS	Additional Comments
Cleaning records available.	N/A		
Cleaning schedule in place and use recorded.	N/A		
Cleaning agents are stored separately from food products.	N/A		
Cleaning equipment cleaned and stored appropriately and separately from food.	N/A		
Only approved chemicals used and current hard copy MSDS's available (< 5 years from issue date).	N/A		
Cleaning procedures followed with detergent and hot water, rinse, sanitise, air dry.	N/A		
Toilets clean as per cleaning schedule with separate equipment.	N/A		
Appropriate cleaning equipment in place.	N/A		

PREMISES & EQUIPMENT MAINTENANCE			
Food Process	Satisfactory/ Unsatisfactory	CRIT/MAJ/ MIN/OBS	Additional Comments
Shop and equipment designed to minimise food safety hazards and cleanable.	S		Walls and floors are made of a cleanable material.
Adequate size of storage area.	S		
Food equipment in working order and acceptable condition.	S		New equipment was getting installed during the inspection.
Condition of refrigerators, freezers and coolroom appropriate.	S		
Adequate artificial lighting over work surfaces and clean.	S		
Extraneous matter control (no rust, flaking paint, etc) in place.	S		New facility
Structurally sound no cracks/damage floors, walls, coving ceilings – glass, precautions against breakage.	S		
Adequate mechanical ventilation over cooking appliances and last cleaned by contractor.	S		Exhaust fan was been installed during the inspection.
Fit out materials appropriate.	S		

PERSONNEL			
Food Process	Satisfactory/ Unsatisfactory	CRIT/MAJ/ MIN/OBS	Additional Comments
Cuts / wounds covered with coloured, waterproof bandaids & disposable gloves worn over bandages.	N/A		
Personal items stored separately from food areas.	N/A		
Protective & appropriate & clean clothing worn, hair contained.	N/A		
No jewellery (except wedding bands, watches and sleeper earrings)	N/A		
Policy covering visitors to premises and in use.	N/A		
Sufficient hand wash facilities, accessible, operational, soap, paper towels and paper bin available.	US		No hand wash basin available in kitchen where food will be prepared and handled.
Record of illness kept and policy understood.	N/A		

SEE
PHOTOS
ATTACHED
N/A
26-10

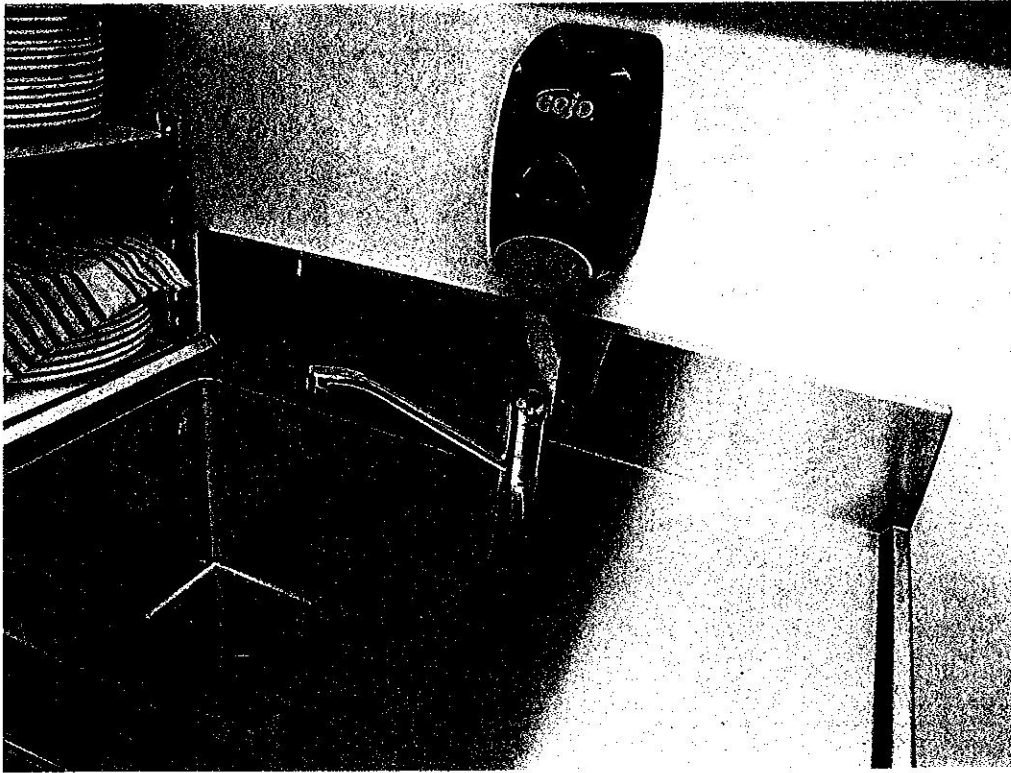
APPROVED SUPPLIERS			
Food Process	Satisfactory/ Unsatisfactory	CRIT/MAJ/ MIN/OBS	Additional Comments
Approved supplier list available.	N/A		
Only approved suppliers are used.	N/A		
Approved food suppliers' agreement form or HACCP certificates available from all current suppliers.	N/A		

TRAINING			
Food Process	Satisfactory/ Unsatisfactory	CRIT/MAJ/ MIN/OBS	Additional Comments
All food handlers are trained appropriately.	N/A		
Training checklist available and completed by all staff members.	N/A		

PEST CONTROL			
Food Process	Satisfactory/ Unsatisfactory	CRIT/MAJ/ MIN/OBS	Additional Comments
Premises pest proofed.	N/A		
No signs of infestation.	N/A		
Pest control contractor's licence current and available.	N/A		
Pest control contractor's public liability certificate current and available.	N/A		
Pest control contractor service reports available which include details of level of pest activity, name, dilution rates, quantities and batch numbers of pesticides used.	N/A		
Current, dated and detailed pest control site map available on site.	N/A		
Bait stations are numbered and secured.	N/A		
Records of pest sighting / monitoring reports completed when required.	N/A		
Only approved pest control chemicals used and current hard copy MSDS's available (< 5 years from issue date).	N/A		

CALIBRATION – 2 POINTS			
Food Process	Satisfactory/ Unsatisfactory	CRIT/MAJ/ MIN/OBS	Additional Comments
Records maintained on <u>hot</u> calibration of all thermometers available on premises. (Hot calibration: 100°C ± 1°C)	N/A		
Records maintained on <u>cold</u> calibration of all thermometers available on premises. (Cold calibration: 0°C ± 1°C)	N/A		
Records of corrective actions when required.	N/A		
Temperature gauge calibration.	N/A		

VERIFICATION & CORRECTIVE ACTION			
Food Process	Satisfactory/ Unsatisfactory	CRIT/MAJ/ MIN/OBS	Additional Comments
Confirmation that the CCP's kept under control and checked by food safety supervisor or manager.	N/A		
Corrective actions to ensure that CCP has been brought under control.	N/A		



**ENERGY EFFICIENCY (ARTIFICIAL LIGHTING AND POWER) - INSTALLATION
CERTIFICATE**

Project Name	Frankies Number
Address	Shop 4, 9-15 Central Avenue Manly NSW 2095
Part of Building to be certified	Shop 4

I hereby certify that:

- a) The works have been inspected during construction and have been completed in accordance with the nominated Standards of Performance.

Measure and/or system	Standards of Performance
Energy Efficiency (Artificial Lighting and Power)	BCA2010 Part J6 and Specification J6

- b) I am a properly qualified person and have a good working knowledge of the relevant codes and standards referenced above. (My qualifications and accreditations are listed below)

Relevant qualifications and accreditations: ELECTRICIAN 949 386
INSTALLED AS PER PLAN

- c) The information contained in this statement is true and accurate to the best of my knowledge.

Name: STEPHEN HARRISON
Company: STEVE HARRISON ELECTRICAL
Address: 27 NARROU RD NARRABEEN
Phone No. 9913 2931 Fax No. 9913 1033

S. Harrison
Signature

22.10.10
Date

ENERGY EFFICIENCY (HOT WATER SUPPLY) - INSTALLATION CERTIFICATE

Project Name	Frankies Number
Address	Shop 4, 9-15 Central Avenue Manly NSW 2095
Part of Building to be certified	Shop 4

I hereby certify that:

- a) The works have been inspected during construction and have been completed in accordance with the nominated Standards of Performance.

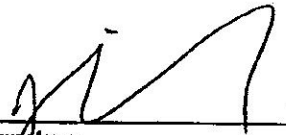
Measure and/or system	Standards of Performance
Energy Efficiency (Hot Water Supply)	BCA2008 Part J7 and Section 8 of AS/NZS3500.4

- b) I am a properly qualified person and have a good working knowledge of the relevant codes and standards referenced above. (My qualifications and accreditations are listed below)

Relevant qualifications and accreditations: LICENCED PLUMBER, DRAINER,
GASFITTER & LP GASFITTER.

- c) The information contained in this statement is true and accurate to the best of my knowledge.

Name: JAMES SOMMERVILLE
Company: SOMMERVILLE PLUMBING PTY LTD
Address: 13 CALLISTEMON CL NARARA
Phone No. 0411753078 Fax No. 02 43282002


Signature

22-10-10
Date

GLAZING - INSTALLATION CERTIFICATE

Project Name	Frankies Number
Address	Shop 4, 9-15 Central Avenue Manly NSW 2095
Part of Building to be certified	Shop 4

I hereby certify that:

- a) The works have been inspected during construction and have been completed in accordance with the nominated Standards of Performance.

Measure and/or system	Standards of Performance
Glazing	Other Glazing • AS1288 (including bi-fold doors, revolving doors, skylights, shopfront doors & one off doors)

- b) I am a properly qualified person and have a good working knowledge of the relevant codes and standards referenced above. (My qualifications and accreditations are listed below)

Relevant qualifications and accreditations: Bulder

- c) The information contained in this statement is true and accurate to the best of my knowledge.

Name: Chad Lumley
Company: Urban Impact
Address: Suite 17, level 1 1-3 Brady St Mosman, NSW - 2088
Phone No. 9960 0015 Fax No. 02 9960 0144


Signature

22/10/10
Date

LIGHTING (GENERAL) - INSTALLATION CERTIFICATE

Project Name	Frankies Number
Address	Shop 4, 9-15 Central Avenue Manly NSW 2095
Part of Building to be certified	Shop 4

I hereby certify that:

- a) The works have been inspected during construction and have been completed in accordance with the nominated Standards of Performance.

Measure and/or system	Standards of Performance
Light (general)	BCA2010 Clause F4.4 and AS 1680.0 - 1998

- b) I am a properly qualified person and have a good working knowledge of the relevant codes and standards referenced above. (My qualifications and accreditations are listed below)

Relevant qualifications and accreditations: ELECTRICIAN 94938C
AS PER PLAN

- c) The information contained in this statement is true and accurate to the best of my knowledge.

Name: STEPHEN HARRISON

Company: STEVE HARRISON ELECTRICAL

Address: 27 NARROY RD NARRABEEN

Phone No. 9913 1033

Fax No. 9913 2931

S. Harrison
Signature

22.10.10
Date

VENTILATION (GENERAL) - INSTALLATION CERTIFICATE

Project Name	Frankies Number
Address	Shop 4, 9-15 Central Avenue Manly NSW 2095
Part of Building to be certified	Shop 4

I hereby certify that:

- a) The works have been inspected during construction and have been completed in accordance with the nominated Standards of Performance.

Measure and/or system	Standards of Performance
Ventilation (general)	BCA2010 Clause NSW F4.5(b) and AS 1868.2 - 1991

- b) I am a properly qualified person and have a good working knowledge of the relevant codes and standards referenced above. (My qualifications and accreditations are listed below)

Relevant qualifications and accreditations:

REFRIGERATION & AIR COND. TRADE LICENSE
TRASH TRUCK DESIGN
22.5 YRS FIELD

- c) The information contained in this statement is true and accurate to the best of my knowledge.

Name: AARON NEAL

Company: TOTAL AIR BALANCING

Address: PO Box 7273 South Perth NSW 2750

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Signature

Date

22/10/10