

Fire Safety Statement

Part 12 of the Environmental Planning and Assessment (Development Certification and Fire Safety) Regulation 2021



Please note:

Information to assist building owners to complete each section of the statement is provided on pages 3, 4 and 5.

Section 1: Type of statement

This is (mark applicable box): ☒ an annual fire safety statement (complete the declaration at Section 8 of this form)
☐ a supplementary fire safety statement (complete the declaration at Section 9 of this form)

Section 2: Description of the building or part of the building

This statement applies to: ☒ the whole building ☐ part of the building

Address (Street No., Street Name, Suburb and Postcode)

665 PITTWATER ROAD DEE WHY NSW 2099

Lot No. (if known)

DP/SP (if known)

Building name (if applicable)

Provide a brief description of the building or part (building use, number of storeys, construction type etc)

2 STOREYS ABOVE

COMMERCIAL

RETAIL

Section 3: Name and address of the owner(s) of the building or part of the building

Full Name (Given Name/s and Family Name) *

Saacs Holding Pty Ltd

* Where the owner is not a person/s but an entity including a company or trust insert the full name of that entity.

Address (Street No., Street Name, Suburb and Postcode)

PO Box 642, Forestville NSW 2087

Section 4: Fire safety measures

Fire safety measure	Minimum standard of performance	Date(s) assessed	APFS *
Portable Fire Extinguisher	AS 2444 & E1.6 of the BCA	02/12/2022	Tony Mcilwraith – F015235A
Smoke Alarm	AS 3786	02/12/2022	Tony Mcilwraith – F015235A
Exit Signs	E4.5, E4.6, E4.8 AS 2293.1	02/12/2022	Tony Mcilwraith – F015235A
Emergency Lights	E4.2 & E4.4 AS2293.1	02/12/2022	Tony Mcilwraith – F015235A
Hose Reel	AS 2441 Clause E1.4	02/12/2022	Tony Mcilwraith – F015235A
Fire Door (Unit 1a)	AS 1905.1 - 2015	02/12/2022	Tony Mcilwraith – F015235A

665 PITTWATER ROAD DEE WHY NSW 2099

Fire Safety Statement

Part 15 of the Environmental Planning and Assessment (Development Certification and Fire Safety) Regulation 2021



Fire Blanket (Unit 1a)	AS 2444.1 & E1.6 of the BCA	02/12/2022	Tony Mcilwraith – F015235A
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* See notes on page 4 about how to correctly identify an accredited practitioner (fire safety) (APFS). Also, new rows can be added if required.

Section 5: Inspection of fire exits and paths of travel to fire exits (Part 15)

Part of the building inspected	Date(s) inspected	APFS *
All fire exits, paths of travel, fire safety notices and doors relating to fire exits	02/12/2022	Tony Mcilwraith – F015235A

* See notes on page 4 about how to correctly identify an accredited practitioner (fire safety) (APFS). Also, new rows can be added if required.

Section 6: Name and contact details of each accredited practitioner (fire safety) (APFS)*

Full name (Given Name/s and Family Name)	Address	Phone	APFS*	Signature
Tony Mcilwraith	13 / 84 Old Pittwater Road Brookvale NSW 2100	(02) 9939 8107	F015235A	

* Where applicable – see notes on page 4 for further information.

Section 7: Details of the person making the declaration in section 8 or 9

Full name (Given Name/s and Family Name)

Prawin Vala

Organisation (if applicable)

Shore Commercial

Title/Position (if applicable)

Asset Manager

Address (Street No, Street Name, Suburb and Postcode)

477, Pittwater Road, Brookvale

Phone

9932 3411

Email

prawin@shorecp.com.au

* The person making the declaration in section 8 or 9 must not be an APFS listed in section 6 or their employer/employee or direct associate.

Section 8: Annual fire safety statement declaration

I, Click here Prawin Vala (insert full name) being the: ☐ owner ☒ owner's agent
declare that:

- a) each essential fire safety measure specified in this statement has been assessed by an accredited practitioner (fire safety) as capable of performing:
- for an essential fire safety measure specified in the fire safety schedule, to a standard no less than that specified in the schedule, or
 - for an essential fire safety measure applicable to the building but not specified in the fire safety schedule, to a standard no less than that to which the measure was originally designed and implemented, and
- b) the building has been inspected by an accredited practitioner (fire safety) and was found, when it was inspected, to be in a condition that did not disclose grounds for a prosecution under Part 15 of the Regulation.

Owner/Agent Signature

Date issued

10/01/2023

Section 9: Supplementary fire safety statement declaration

I, Click here (insert full name) being the: ☐ owner ☐ owner's agent

declare that each critical fire safety measure specified in this statement has been assessed by an accredited practitioner (fire safety) as capable of performing to at least the standard required by the current fire safety schedule for the building.

Fire Safety Statement

Part 15 of the Environmental Planning and Assessment (Development Certification and Fire Safety) Regulation 2021



Owner/Agent Signature

[Handwritten signature]

Date issued

10/01/2023

Note:

- A fire safety statement for a building must not be issued unless the statement is accompanied by a fire safety schedule for the building in accordance with the Regulation.
- The building owner(s) are also responsible for ensuring that essential fire safety measures are maintained in accordance with section 81 of the Regulation. An agent cannot be made responsible for this requirement.

Fire Safety Schedule

2 December 2022

Property | 665 Pittwater Road DEE WHY NSW 2099

Fire Safety Measure	Minimum Standard of Performance
Portable fire extinguisher	AS 2444, E1.6 of the BCA
Smoke alarm	AS 3786
Exit signs	E4.5, E4.6, E4.8, AS 2293.1
Emergency lights	E4.2 & E4.4, AS 2293.1
Hose reel	AS 2441 Clause E1.4
Fire Door (unit 1a)	AS 1905.1-2015
Fire Blanket (unit 1a)	AS 2444.1 & E1.6 of the BCA