



CONSTRUCTION CERTIFICATE INFORMATION DOCUMENT

- CONSTRUCTION CERTIFICATE
- PRINCIPAL CERTIFYING AUTHORITY
- MODIFIED CONSTRUCTION CERTIFICATE

Under Sections 6.6, 6.7, 6.8 and Division 6.3 of the Environmental Planning and Assessment Act 1979

Information Document submitted with
GROUP DLA (NSW) Pty Ltd.
Level 7, 10 Bridge Street, Sydney NSW 2000

PROJECT ADDRESS / SITE ADDRESS DETAILS

Address: _____

Lot No,DP,SP,vol/fol.etc _____

APPLICANT (TENANT or OWNER)

Company Name: _____

Contact Name: _____

Address: _____ Post Code: _____

Contact Numbers: _____ Phone: _____ Mobile: _____

Facsimile: _____ Email: _____

Name of Applicant (in full) _____

Signature of Applicant: _____ Date: _____

Furthermore, by completing this section I hereby confirm that I am not the Principal/Managing Contractor, Builder, Project Manager or Architect acting on the Applicants behalf in lodging the application.

CONSENT OF OWNER(S)

I / we as the owner/s of the above property engage and authorise either Brett Claburn, Justin Jones-Gardiner, Charles Slack-Smith of Group DLA (NSW) Pty Ltd to provide the Complying Development / Construction Certification and to act as the Principal Certifier for the subject building works, and/or carry out site inspections and lodge the Notice of Commencement / Appointment of the Principal Certifier with the relevant Council. Furthermore, by signing this owners consent I also authorise the agent named in Section 6 or Section 7 of the Fire Safety Certificate to act on my behalf to make the declaration certifying the essential fire safety measures specified in the Fire Safety Certificate in accordance with Clause 171 of EP&A Regs 2000.

Names(s) / Company: _____

Address: _____

Contact Numbers: _____ Phone: _____ Mobile: _____

Facsimile: _____ Email: _____

Signature of Registered owner(s) _____

Date: _____

DESCRIPTION OF PROPOSED DEVELOPMENT

No. _____

Contracted cost of work: \$ _____ Inc GST _____ Existing use of Site: _____

Note: Cost of works is the contract price, or if no contract is in place a genuine and accurate estimate, for all labour, material costs associated with any demolition or construction required for the development, including cost of construction of any building works and the cost of such things as installing the plant, fittings, fixtures and equipment, GST is to be included in this price. *examples Office (Class 5), Retail (Class 6), Warehouse (Class 7b) Industrial (Class 8) etc*

Gross floor area of building (Existing) _____ (Proposed) _____ m² :

Gross Site Area _____ Number of storey's of Building (including underground storey's): _____ m²:

List of documents accompanying this Information Document (Please list documents below or provide a list of documents separately as a transmittal or otherwise):

- Please find attached list of documents lodged with this Information Document / Refer to Portal Lodgment documents

PROJECT MANAGEMENT (PRINCIPAL CONTRACTOR)

The overall co-ordination and control of this project will be carried out by:

Principal Contractor: (Bus. Name)	
Contact (NAME of person):	
Postal Address:	
Contact No (Mobile Number):	
Email Address:	

CONSTRUCTION MATERIALS

(Note: This information is to be the predominant construction type of the building or subject works, and is used for ABS Statistics)

Walls:		Roof:		Floor:	
Brick Veneer	<input type="checkbox"/>	Aluminium	<input type="checkbox"/>	Concrete	<input type="checkbox"/>
Full Brick	<input type="checkbox"/>	Concrete	<input type="checkbox"/>	Timber	<input type="checkbox"/>
Single Brick	<input type="checkbox"/>	Concrete tile	<input type="checkbox"/>	Other	<input type="checkbox"/>
Concrete Block	<input type="checkbox"/>	Fibrous cement	<input type="checkbox"/>	Unknown	<input type="checkbox"/>
Concrete/ masonry	<input type="checkbox"/>	Fibreglass	<input type="checkbox"/>		<input type="checkbox"/>
Concrete	<input type="checkbox"/>	Masonry	<input type="checkbox"/>		<input type="checkbox"/>
Steel	<input type="checkbox"/>	Shingle tiles	<input type="checkbox"/>		<input type="checkbox"/>
Fibrous cement	<input type="checkbox"/>	Slate	<input type="checkbox"/>		<input type="checkbox"/>
Hardiplank	<input type="checkbox"/>	Steel	<input type="checkbox"/>		<input type="checkbox"/>
Timber/ weatherboard	<input type="checkbox"/>	Terracotta	<input type="checkbox"/>	FRAME	
Cladding-aluminium	<input type="checkbox"/>	Other	<input type="checkbox"/>	Timber	<input type="checkbox"/>
Curtain glass	<input type="checkbox"/>	Unknown	<input type="checkbox"/>	Steel	<input type="checkbox"/>
Other	<input type="checkbox"/>		<input type="checkbox"/>	Other	<input type="checkbox"/>

ASBESTOS REMOVAL

Does the proposal involve removal of any bonded asbestos Yes No

If so provide approximate area (m²)

Important Note: If Yes is ticked above and more than 10m² is proposed to be removed then a copy of the contract with the licenced Asbestos removal contractor is required as part of the CDC Application information and is to include details to confirm compliance with Clause 136E of the EP&A Regulation 2000 requirements.

FIRE SAFETY SCHEDULE TO APPLICATION FOR CERTIFICATION

Schedule of existing/proposed or modified Fire Safety measures
(for any existing building and the land on which it is situated)

Item No.	Proposed / Existing Measure	Is this measure installed in the building? Yes/ No	If yes, enter the current standard of performance (eg: BCA and Aust Stand)	Proposed alteration of existing measure (✓) <input type="checkbox"/>
1.	Access Panels, doors and hoppers to fire resisting shafts			<input type="checkbox"/>
2.	Automatic fail safe devices			<input type="checkbox"/>
3.	Automatic fire detection and alarm system			<input type="checkbox"/>
4.	Automatic fire suppression system (sprinkler)			<input type="checkbox"/>
5.	Automatic fire suppression system (others - specify)			<input type="checkbox"/>
6.	Emergency lifts			<input type="checkbox"/>
7.	Emergency lighting			<input type="checkbox"/>
8.	Emergency warning and intercommunication system			<input type="checkbox"/>
9.	Exit signs			<input type="checkbox"/>
10.	Fire alarm monitoring (ASE)			<input type="checkbox"/>
11.	Fire control centres and rooms			<input type="checkbox"/>
12.	Fire dampers			<input type="checkbox"/>
13.	Fire doors			<input type="checkbox"/>
14.	Fire hose reel systems			<input type="checkbox"/>
15.	Fire hydrant systems			<input type="checkbox"/>
16.	Fire seals (protecting openings in fire resisting components of the building)			<input type="checkbox"/>
17.	Fire shutters			<input type="checkbox"/>
18.	Fire windows			<input type="checkbox"/>
19.	Light weight construction			<input type="checkbox"/>
20.	Mechanical air handling systems			<input type="checkbox"/>
21.	Perimeter vehicle access for emergency vehicles			<input type="checkbox"/>
22.	Portable fire extinguishers & fire blankets			<input type="checkbox"/>
23.	Pressurising system			<input type="checkbox"/>
24.	Safety curtains in proscenium openings			<input type="checkbox"/>
25.	Smoke and heat Vents			<input type="checkbox"/>
26.	Smoke dampers			<input type="checkbox"/>
27.	Smoke detectors and heat detectors			<input type="checkbox"/>
28.	Smoke doors			<input type="checkbox"/>
29.	Solid-Core doors			<input type="checkbox"/>
30.	Stand-By power systems			<input type="checkbox"/>
31.	Wall wetting sprinkler and drencher systems			<input type="checkbox"/>
32.	Warning and operational signs			<input type="checkbox"/>
33.	OTHERS – Specify			<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

This is an accurate statement of all the existing fire safety schedule implemented in the whole building and the land on which it is situated.

Signed:

(owner/agent)

Name :

Date :