

Identification of Building

Name of building:

Unit: House No.: Street:

Suburb: Postcode:

Side of street: Nearest cross street:

Owner Details

Surname: First Name:

Address:

Due Date:

Essential Fire Safety Measures

Type	Inspection Date	Tested by Name & Address	Min. Standard Performance <small>(ie. An Australian Standard or relevant part of the building Code of Australia)</small>	Result

Declaration

I (Owner/Agent)
of

Certify that

- each essential fire safety measure specified in this statement has been assessed by a properly qualified person and was found, when it was assessed, to be capable of performing:
 - in the case of an essential fire safety measure applicable by virtue of a fire safety schedule, to a standard no less than that specified in the schedule, or
 - in the case of an essential fire safety measure applicable otherwise than by virtue of a fire safety schedule, to a standard no less than that to which the measure was originally designed and implemented, and
- that a properly qualified person (whether the person referred to in paragraph (a) or another person) has inspected the building and has certified that, as at the date of the inspection, the condition of the building did not disclose any grounds for prosecution under Division 4C of part 7B of the Environmental Planning and Assessment Regulation 1994, and
- the information contained in this certificate is, to the best of my knowledge and belief, true and accurate.

Signature (Owner/Agent): Date:

A copy of this certificate with the relevant fire safety schedule *must be*:

- Forwarded to the Council and the Commissioner of the New South Wales Fire Brigades.
- Prominently displayed in the building.

Fee:	1-5 Fire Safety Measures on Statement: \$65.00	6 + Fire Safety Measures on Statement: \$105.00
Fee Paid:	\$ <input type="text"/>	Receipt No: <input type="text"/> Date: <input type="text"/>