



Certification Application Form

1. Application Sought	
<input type="checkbox"/> Construction Certificate	<input type="checkbox"/> S.4.55 Construction Certificate
<input type="checkbox"/> Complying Development Certificate (CDC)	<input type="checkbox"/> Amended CDC
<i>If ticked, please select one of the following:</i>	
<input type="checkbox"/> SEPP (Exempt & Complying Development Codes) 2008	
<input type="checkbox"/> SEPP (Affordable Rental Housing) 2009	
<input type="checkbox"/> Others	
<input type="checkbox"/> Occupation Certificate – Interim / Final	
<input type="checkbox"/> To appoint Karl Diskoros of Building Certifiers as the Principal Certifiers	
<i>Office Use Only</i>	
Date of Receipt / /	
Application #:	

2. Applicant's Details		
<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other:		
Given Name(s)	Surname	
<input type="text"/>	<input type="text"/>	
Street Address		
<input type="text"/>		
Suburb	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>
Telephone	Mobile	Fax
<input type="text"/>	<input type="text"/>	<input type="text"/>
Email		
<input type="text"/>		
Note: The applicant must be the property owner or a person authorised by the owner to lodge the application. A building contractor cannot be the applicant unless they are the owner of the property.		

3. Owner's Details		
<input type="checkbox"/> Owner details same as above		
<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other:		
Given Name(s)	Surname	
<input type="text"/>	<input type="text"/>	
Street Address		
<input type="text"/>		
Suburb	State	Postcode
<input type="text"/>	<input type="text"/>	<input type="text"/>
Telephone	Mobile	Fax
<input type="text"/>	<input type="text"/>	<input type="text"/>
Email		
<input type="text"/>		

4. Subject Property to be Developed

Unit/Street No.

Street Name

Suburb

State

Postcode

Lot / Portion

DP No

Section

Council

5. Description of Building Works

6. Building Classification

House, Townhouse, Granny Flat, Private Garage, Pool or the like:

Select the appropriate Building Code of Australia Classification(s)

Class 1a

Class 1b

Class 10a

Class 10b

Residential Units and Commercial Developments:

Select the appropriate Building Code of Australia Classification(s)

Class 2

Class 3

Class 4 Part

Class 5

Class 6

Class 7a

Class 7b

Class 8

Class 9a

Class 9b

Class 9c

Class 8

7. Estimated cost of Development

Total estimated cost of Project

\$

including GST

8. Development Details

Does the development involve a BASIX certificate to be obtained?

Yes No

Is any long service payment levy payable under s.34 of the Building Construction Industry Long Service Payments Act 1986?

Yes No

Does the development involve any demolition work which requires the removal of asbestos?

Yes No

If yes, estimated area of bonded asbestos material that will be disturbed, repaired or removed (in m²):

m²

9. Principal Contractor or Owner Builder

Principal Contractor:

Contractor Licence No.

Owner Builder:

Permit No.

10. Details of Principal Contractor / Owner Builder

Given Name(s)

Surname

Company *(if applicable)*

Street Address

Suburb

State

Postcode

Telephone

Mobile

Fax

Email

11. Signature of Applicant

Declaration – Please review and tick the following:

- I/We apply for approval to carry out the development at the subject property detailed above within this application.
- I/We declare that all the information in this application and checklis is true and correct to the best of my/our knowledge and hereby indemnify the certifying authority and PC against any damage and losses as a result of incorrect information submitted.
- I/We understand that building works cannot continue until 2 days after the appointment of the PC and it is my/our responsibility to arrange all mandatory critical stage inspections via prior written notice.
- I/We understand that if a mandatory critical stage inspection is missed or if we do not construct the building in according with the Construction Certificate / Complying Development Certificate approval, the PC will be unable to issue an Occupation Certificate.
- I/We hereby appoint *Samy Mikhail / Andrew Soliman / Andrew Guirgis* of *Building Certifiers* as the Principal Certifier (PC) for the building works identified in this application.

(Appointing a PC is mandatory, appointing Samy Mikhail / Andrew Soliman / Andrew Guirgis as the PC is optional)

Name (block letters):

Signature (Applicant)

Date:

12. Owners Consent

- I/We authorise the right of entry into the subject property to conduct inspections of building works.
- As owner(s) of the property the subject of this Construction Certificate / Complying Development Certificate Application, I/We hereby consent to this application.

Name (block letters):

Owner(s) Signature:

Date:

13. Schedule 1: Building Materials

Please complete the below schedule. The information provided will be sent to the Australian Bureau of Statistics.

Number of Storeys (including underground floors)

Gross floor area of new building (m²)

Gross site area (m²)

Please indicate the materials to be used in the construction of the new building(s):

Floor	Frame	Walls	Roof
<input type="checkbox"/> Concrete or Slate	<input type="checkbox"/> Timber	<input type="checkbox"/> Cavity Brick (Double)	<input type="checkbox"/> Tiles
<input type="checkbox"/> Timber	<input type="checkbox"/> Steel	<input type="checkbox"/> Brick Veneer (Single)	<input type="checkbox"/> Concrete or Slate
<input type="checkbox"/> Other	<input type="checkbox"/> Aluminium	<input type="checkbox"/> Concrete or Stone	<input type="checkbox"/> Fibre Cement
<input type="checkbox"/> <i>Not Specified</i>	<input type="checkbox"/> Other	<input type="checkbox"/> Fibre Cement	<input type="checkbox"/> Steel
	<input type="checkbox"/> <i>Not Specified</i>	<input type="checkbox"/> Timber	<input type="checkbox"/> Aluminium
		<input type="checkbox"/> Curtain Glass	<input type="checkbox"/> Other
		<input type="checkbox"/> Steel	<input type="checkbox"/> <i>Not Specified</i>
		<input type="checkbox"/> Aluminium	
		<input type="checkbox"/> Other	
		<input type="checkbox"/> <i>Not Specified</i>	



Notice of Commencement

1. Applicant's Details

Mr Mrs Miss Ms Other:

Given Name(s)

Surname

Street Address

Suburb

State

Postcode

Telephone

Mobile

Fax

Email

2. Subject Property to be Developed

Unit/Street No.

Street Name

Suburb

State

Postcode

Lot / Portion

DP No

Section

Council

3. Description of Building Works

4. Development Consent

DA / CDC Consent Number

Date of Determination:

Approval Authority

5. Appointment of Principal Certifying Authority

Certifying Authority

Karl Diskoros of Building Certifiers

Accreditation Body

Building Professionals Board

Address

Suite 49 / 2 O'Connell St, Parramatta NSW 2150

Email

Karl@certifiers.sydney

Mobile

Phone

(02) 8279 7844

Fax

6. DA / CDC Consent Compliance

Have all conditions required to be satisfied prior to the commencement of work been satisfied?

Yes

No

(Conditions may include the payment of security, section 94 contributions, endorsement of building plans by water supply or other authorities)

7. Principal Contractor or Owner Builder

Principal Contractor:

Contractor Licence No.

Owner Builder:

Permit No.

8. Evidence of Insurance

Attach **one** of the following documents to this notice:

- i) Evidence the licenced person above is insured to carry out this type of work; or
- ii) A declaration signed by each owner of the land that the reasonable market cost of labour and materials to be used is less than \$20,000

9. Principal Contractor Details

Mr Mrs Miss Ms Other:

Given Name(s)

Surname

Company

Street Address

Suburb

State

Postcode

Telephone

Mobile

Fax

Email

10. Notice of Commencement

Date of work is to commence:

11. Principal Certifiers Declaration

Building Certifiers acknowledge that they have been appointed by the applicant to carry out the role of the Principal Certifier for this development.

Building Certifiers acknowledge that they have seen evidence that the builder is licenced and insured, or have seen evidence that the building works is to be undertaken by a person with an owner-builder permit where required by the Home Building Act.

Principal Certifier Name (on behalf of Building Certifiers)

Principal Certifier Signature

Date

12. Applicant's Declaration

The Applicant acknowledges that Building Certifiers have been appointed to carry out the role of the Principal Certifier for this development.

The applicant acknowledges that they have provided evidence that the builder is licenced and insured, or that the building works are to be undertaken by a person with an owner-builder permit where required by the Home Building Act.

Applicant Name(s) (block letters)

Applicant(s) Signature

Date

13. Privacy Policy

The information you provide in this notice is required under the Environmental Planning & Assessment Act 1979 if you are going to erect a building or carry out subdivision work. If you do not provide the information 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 during the course of development works.

Application for an Occupation Certificate



BUILDING CERTIFIERS

Certifying Your Building Dream

1. Application Sought

Interim Occupation Certificate (IOC)

Final Occupation Certificate (OC)

2. Applicant's Details

Mr Mrs Miss Ms Other:

Given Name(s)

Surname

Street Address

Suburb

State

Postcode

Telephone

Mobile

Fax

Email

3. Subject Property being Developed

Unit/Street No.

Street Name

Suburb

State

Postcode

Lot / Portion

DP No

Section

Council

4. Development Consent

DA Consent Number *(if applicable)*

Date of Determination:

CC/CDC Approval Number

Date of Determination:

Approval Authority

5. Application Scope

- Application for Whole Building
- Application for Part of Building *(if selected, describe below)*

6. Description of Building Use

7. Building Classification

Building Code of Australia Classification

8. Accompanying Documentation

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

A copy of the DA, CDC and/or CC
(as applicable, if not sought through Building Certifiers)

Required Attached

All certificates and/or documentation relied upon

Required Attached

9. Signature of Applicant

Declaration – Please review and tick the following:

I declare that all the information in this application is true and correct to the best of my knowledge. I 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 in this application and requisite documentation is misleading, any approval granted may be void.

Name (block letters):

Signature (Applicant)

Date: