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| Property Address |  |
|  |  |
| CC or CDC  Application No. |  |
|  |  |
| Description of Work  Being Certified |  |
| I hereby certify that:  All glazing is installed to AS 2047 – 2014 “Windows & External Doors in Buildings – Selection & *Installation”,* AS 1288 – 2006 *“Glass in Buildings”* and AS 1170.2 – 2021 *“Wind Actions”.*  BAL Level: ………………………….  Wind Rating: ………………………..  (If applicable)  I confirm that I am appropriately competent and qualified to certify this element. | |
| Details of the Person  Making the Statement | Name:  Email:  Phone No.:  Licence No.:  Company: |
|  |  |
| Date |  |
|  |  |
| Signature |  |