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| Property Address  |  |
|  |  |
| CC or CDC Application No.  |  |
|  |  |
| Description of WorkBeing Certified |  |
| I hereby certify that:[ ]  The Termite Management system installed complies with Australian Standard AS 3660 – 2014 *“Termite Management”* and Building Code of Australia 2019 Part 3.1.4, including a durable notice being permanently fixed to the building in a prominent location in accordance with Part 3.1.4.4[ ]  Alternatively, I confirm a Termite Management system is not required as per BCA Clause 3.1.4.2. Attach a statement confirming the reasons and/or materials used.I confirm that I am appropriately competent and qualified to certify this element. |
| Details of the PersonMaking the Statement | Name: Email: Phone No.: Licence No.: Company:  |
|  |  |
| Date |  |
|  |  |
| Signature |  |