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| Property Address |  |
|  |  |
| CC or CDC  Application No. |  |
|  |  |
| Description of Work  Being 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 Person  Making the Statement | Name:  Email:  Phone No.:  Licence No.:  Company: |
|  |  |
| Date |  |
|  |  |
| Signature |  |