|  |  |
| --- | --- |
| Project Name  (if applicable) |  |
| Development Address |  |
| Development Consent No. (including Modifications) |  |
| CC / CDC No.  (including Modifications) |  |
| Detailed Description of the Building Part to be Certified |  |

I hereby certify that:

1. The building work has been inspected during construction and complies with the approved Construction Certificate / Complying Development Certificate documentation, plans, specifications, any other documents approved in writing by the Principal Certifier, and the nominated Standards of Performance listed below.
2. The building work, form of construction, materials and design have been completed in accordance with the Building Code of Australia and relevant referenced documents.
3. All supporting documentation provided to the certifier has been checked and complies with NCC/BCA Cl. A5.2 Evidence of Suitability.
4. Where required, the building work has been constructed in accordance with relevant conditions of development consent.
5. CC’s - Pursuant to S39(2)(b)(v) of the Environmental Planning and Assessment (Development Certification & Fire Safety) Regulation 2021, I acknowledge this certificate will be relied on by the Principal Certifier to issue an Occupation Certificate, and confirms the relevant building component, element or measure identified in this certificate is suitable for occupation or use in accordance with its classification under the NCC/BCA.
6. CDC’s - Pursuant to S10(2)(c) Environmental Planning and Act 1979, I acknowledge this certificate will be relied on by the Principal Certifier to issue an Occupation Certificate, and confirms the relevant building component, element or measure identified in this certificate is suitable for occupation or use in accordance with its classification under the NCC/BCA.
7. For class 2 buildings, all variations related to a building element or Performance Solution have been authorised by a Design Practitioner and a declared new design. Variations to an aspect of a regulated design unrelated to a building element or Performance Solution which do not need to be signed off by a Design Practitioner have been recorded by the Building Practitioner in a variation statement.
8. I am a suitably qualified person and have a good working knowledge of the NCC/BCA and the relevant Standards of Performance referenced below. My experience, qualifications, and registrations/accreditations etc are listed below.

|  |  |
| --- | --- |
| **Measure and / or System** | **Standards of Performance** |
| **Mechanical Ventilation**  **Note:** Delete non applicable | NCC/BCA 2019 (Amdt 1) Clauses F4.5, F4.11, F4.12, Section j Part J5 AS1668.2+A1 & 2-2012, AS16681+A1-2015, AS1668.4-2012 |
| **Mechanical Ventilation –  Automatic Shutdown**  **Note:** Delete non applicable | NCC/BCA 2019 (Amdt 1) Clauses E2.2, Table E2.2a, NSW Table E2.2b, Spec E2.2b, AS1668.1+A1-2015, AS1668.2+A1 & 2-2012,  H101.22 |
| **Smoke Hazard Management System – Pressurisation/Smoke Exhuast**  **Note:** Delete non applicable | NCC/BCA 2019 Amdt 1 Clauses C2.12, D1.7, Part E2 & Spec E1.8, Spec G3.8, AS1668.1 +A1-2015 |
| **Smoke and Heat Vents**  **Note:** Delete non applicable | NCC/BCA 2019 (Amdt 1) Clauses G3.8, NSW Table E2.2b, Spec E2.2a, Spec E2.2c, Spec G3.8, & AS 2665 – 2001 |
| **Performance Solution Report**  **Note:** Delete non applicable | Report Number: ………………………………  Revision: ………………………………………  Date: …………………………………………..  Prepared by: …………………………………. |
| **Section J Report (JV3)** | Report Number: ………………………………  Revision: ………………………………………  Date: …………………………………………..  Prepared by: …………………………………. |
| **Details of any exclusions or limitations (if any)** |  |
| **Other Practices, Documents or Standards relied upon for this Certification**  Copies attached (this includes any relevant certificates provided to you by subcontractors and suppliers, manufacturers, test reports etc) |  |

|  |  |
| --- | --- |
| Name |  |
| Company |  |
| Phone |  |
| Email |  |
| Qualifications |  |
| Experience |  |

The information contained in this statement is true and accurate to the best of my knowledge.

|  |  |  |  |
| --- | --- | --- | --- |
| Date |  | Signature |  |