



Capital Territory Government

**ACT Planning and** Land Authority

### Certificate of Completion of Building Work (from certifier) Application for Certificate of Occupancy and Use (COU) (by owner)



- Certifiers should use this form to notify the Building Controller within seven days of building being completed, by using Parts A & B
- Owners of land (or their agent) should use this form to apply for a COU by using Parts A & C
- It is an offence for a person to occupy or use, or to permit another person to occupy or use, a building or part of a building (including
- a swimming pool) unless a respective COU has been issued (except where it is exempt from requiring a COU).
- Send or lodge this form at: BEPCON GPO Box 1908 Canberra ACT 2601 or BEPCON Cnr Lysaght & Hoskins Sts Mitchell ACT
- NOTE: If either Part B or C cannot be completed, the form can be lodged and the missing part lodged later. However, a COU cannot be issued if the certificate (Part B) and an application (Part C) are not lodged.

### WARNING TO OWNERS: DO NOT SIGN THIS FORM UNTIL YOU HAVE READ THIS ADVISORY INFORMATION

It is recommended that owners seek appropriate advice to determine whether the building work and other contract requirements have been completed satisfactorily. This form should not be signed before the completion of building work.

	The state of the s
PART A Project - Owner or certifier to complete	PART C - Owner (or agent) to complete
Plan registration 033755/A number	Owner details - (include ALL owners) G AND LAW
Block 36 Section 22 Unit	name(s)
Suburb Campbell	
Description of work Alterations to Residence & Bay Window	
Please indicate if the project involved:  electrical work  plumbing or sanitary drainage work  Please indicate if the project involved:  Ves No	A contact postal address
PART B - Certifier declaration	Only if different to property street address  Contact phone no.
Name of certifier  Glenn Chambers  Certifier number  The building work referred to herein appears to me to have been completed, and I hereby give to the Building Controller advice that:  I am satisfied that:  the building work has been completed in accordance with the requirements of the Building Act 1972 and substantially in accordance with the approved plans; and  the building or part of the building that is the work as erected or altered (including demolished where applicable) is structurally sufficient, sound and stable for the purposes for which it is intended to be occupied or used.  The following documents are required under subsection 40 of the Building Act 1972.  Written evidence of the obtaining of any consents and approvals required to have been obtained under paragraph 34 (1) (d);  A copy of the plan referred to in paragraph 38A (2) (a);  A copy of the plan referred to in paragraph 38A (7) in relation to the building work;  Where the regulations require that, upon completion of the building work, the consent or approval of any person, body or authority is to be obtained - written evidence of the obtaining of that consent or approval;  Any certificate obtained under section 39A, if no certificate under that section has been obtained, a written statement to the effect that - the certifier is satisfied that the building or part of the building as erected or altered is structurally sufficient, sound and stable for the purposes for which it is to be occupied or used; and no certificate under section 39A is required;  All other documents or papers relating to the building work referred to in paragraph 40(1)(j) of the Building Act 1972.  I have provided all the relevant documents required by subsection 40 (1) of the Buildin Act 1972.  If the owner of the land applies for a certificate the Building Controller would be justified in issuing a certificate in respect of the work under the subsection below: (tick one box only).	Agent's name  Postal address  Contact phone no.  NOTE: You may only make this application on behalf of the owners of the property if you have appropriate written authorisation from all of the owners and attached it to this application. This also applies if you are a part owner or joint owner making application on behalf of the owners.  Declaration - (by owner or agent)  Iam (or we are):  Tick one box only the only owner(s) of the above described land: the agent authorised by the owner(s) to apply for a COU on their behalf, and I have attached that authority:  I (or we) am satisfied that the building work and related requirements have been completed to my (our) satisfaction and hereby apply for a COU in respect of the above described work to be issued and sent to the owner(s) address  Tick one box only the owner(s) address  Tick one box only BEPCON Mitchell Office for collection  READ THE WARNING ON THIS FORM BEFORE SIGNING  Signatures of ALL owners or agent
This building work is subject to an alternative solution under the BCA Yes Vo	i P

9/12/200

1200 B

# Metropolitan Building Surveyors and Certifiers



### Final Inspection Report

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Project De	scription:	ALTE	RATIONS	TO R	ESIDENC	E & BAY V	VINDOW
Unit 1919	Block	36	Section	22	Suburb	CAMPBELI	- -
Address:					Builder:	PETER LA	WRENCE
Approved P	lan No: 03.	3 <i>755/A</i>	An	nended	Plan/s No:		
I certify that	the building wo	rk inspec	ted:				
Is substantial	lly in accordance	e with the	e approved j	plan	$\square$		
Is not in acco	ordance with the	approve	d plan				
Requires re-i	nspection when	items be	low are rect	tified			
The followin	g items require o	attention		*****************			
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Required C	ertifications	· · · · · · · · · · · · · · · · · · ·					9945 Minimum (1909) (1909) (1909)
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☐ Civi	1/		Glazing	//		Fire Services	//
☐ Elec	trical//		Health	//	🗖	Liquor Licensi	ing/
☐ Surv	rey/		Trusses	//		Wet Seal	/
☐ Term	nite/		Other		•••••		//
Inspected by	: Glenn Cha	mbers	Signature			Date:?	1 12 12003
Certifier: Gl	enn Chambers	B14	Certifier (When inspe	_	ature:		

# Metropolitan Building Surveyors and Certifiers/



### Inspection Report

						Troject	1 1 VO: NI 23239
Project Descri	ption:	ALTERA	ATIONS T	TO RES	IDENCE	& BAY	WINDOW
Unit	Block	36	Section	22	Suburb:	CAMP.	BELL
Address:					Builder:	PETER	LAWRENCE
Approved Plan N	No: 033	3755/A	Ame	ndment	Plan/s No:		
Inspection Stage	: Pre - S	Sheet					
I certify that the b	ouilding wo	rk inspec	ted:		,		
Is substantially in	accordanc	e with the	e approved	plan	V		
Is not in accordar	nce with the	approve	d plan				
Requires re-inspe	ection when	the items	s below are	rectified:			
The following iter	ms require (	attention:				9	
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doors			,		***************************************		7
Inspected by:	Glenn Ch	ambers	Signa			Date:	/3 / S /2003.
Certifier: Glenn	Chambers	B14	Certifier	's Signat ed by Certifie		••••	• • • • • • • • • • • • • • • • • • • •

# Metropolitan Building Surveyors and Certifiers



# Inspection Report

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Project Descri	ption: ALTER	RATIONS T	TO ŘES	IDENCE	& BAY WINDOW	
Unit	Block 36	Section	22	Suburb:	CAMPBELL	
Address:				Builder:	PETER LAWRENCE	7
Approved Plan 1	No: 033755/A	Ame	ndment	Plan/s No:		
Inspection Stage	e: Floor Frame			·		
I certify that the l	ouilding work inspe	cted:				
			1 <sub>0.11</sub>			
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Is not in accordar	nce with the approv	ed plan			Chipman St.	• *
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		***************************************			1 4 AUG 2003	
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Inspected by:	Glenn Chamber	s Signatur	re Z		Date:	<u>, E, co</u>
Certifier: Glenn	Chambers B14	1	r's Signat			
		(When inspect	ea by Certifie	er s agent)		

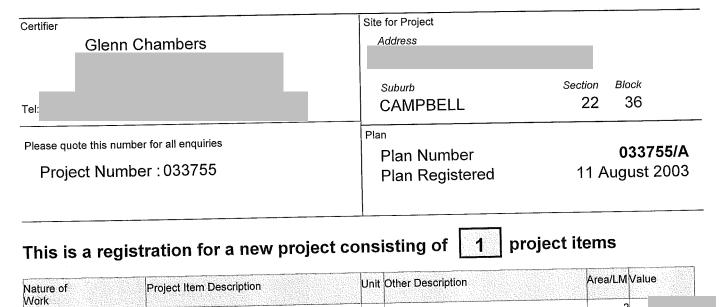


ALTERATIONS TO

## ACT Building, Electrical and Plumbing Control

GPO Box 1908, Canberra ACT 2601

# Registration Acknowledgement



**Building Levy** 

RESIDENCE

**BEPCON Mitchell Office** GPO Box 1908 Canberra ACT 2601 Ground Floor, Mitchell Business Centre Corner of Lysaght & Hoskins Streets

Mitchell Telephone: 6207 6262

Facsimile: 6207 6258

**BEPCON Licensing Office** GPO Box 1908 Canberra ACT 2601 Ground Floor, Dame Pattie Menzies House North 16 Challis Street Dickson

Telephone: 6207 6309 Facsimile: 6207 6324

Home Owners Warranty



Y

HIA INSURANCE SERVICES P/L

ABN 84 076 460 967
An associated company of
Aon Risk Services Australia Ltd
79 Constitution Avenue
Campbell ACT 2612
Telephone (02) 6249 6366
Facsimile (02) 6257 7635
CLAIMS ENQUIRY LINE
1800 554 255

Certificate No: 30444 Local Authority Copy Issue Date 07/07/2003

Please note that Aon Risk Services Australia Ltd ABN 17 000 434 720 is arranging the insurance policy as agent of the insurer below.

They also act as agent of the insurer below and not as agent of the insured in dealing with or settling any claim.

PW&RALawrence

**Builder Name:** 

PW&RALawrence

ABN:

14 933 217 790

Licence Number:

6972B

Owner/s:

Job / Site Details

Δt·

Unit No:

Block:

Section, 34

**Building Contract Details** 

Fixed Price Contract Dated: 05/07/2003 Declared Building Contract Value

For the Construction of:

Alteration/Addition

Special Conditions:

Signed for and on behalf of the insurer:

AON Junioum HIA INSURANCE SERVICES
Tailormade for the track

Total includes Policy Fees, Stamp Duty and GST.

Insurer:

- Royal & Sun Alliance Insurance Australia Ltd ACN 005 297 807 ABN 48 005 297 807





# Planning & Land Management

GPO Box 1908 Canberra ACT 2601 Homepage: www.palm.act.gov.au ABN 37 307 569 373 16 Challis Street Dickson

# Tax Invoice/Receipt

Customer Service Centre BEPCON Dickson Office BEPCON Mitchell Office Telephone Enquiries: ACTLIC Plan Room

Receipt No: 253/0033/000008

Date: 18/02/2003

Time: 13:21:39

Cash 00.0 Payment Totals --

Cheque

EFTPOS Card 00.00

Total

Design & Siting Training Levy Building Levy

000-0036-0022-CAMP 000-0036-0022-CAMP 000-0036-0022.CAMP

Debtor

Remarks

Block/Section

Invoice Oty

Total Payments

Cashier Signature,



Planning and Land



Part A:



**Application by Owner for Building Approval and Owner's Appointment of a Certifier and Owner's Notification to Certifier of Builder Details** 

### Part B:

Certifier's Registration to Building Controller of **Building Approval and** Certifier's Notification to Building Controller of Builder Details

Lessee/owner details	
Surname or company name	
Title/First name/ Initials or Australian Company Number (ACN)	
If a company, name of contact person	
Postal address	
Site details Block	36 Section 22 Unit
Suburb	CAMPBELL
Street address	
In appointing a certifier you are appoint builder and to certify if that work meets	ing the person that you wish to check the building work carried out by the the requirements of the <i>Building Act 1972</i> .
hereby advise as required by the Build	ling Act 1972:
I have appointed	CHAMBERS to act as a certifier in relation to this building work (must be an individual person,
I have also appointed	as my agent to get an my habelf (if annihable to this annihable)
	as my agent to act an my behalf (if applicable to this application)
l also provide notification to the certi	ifier, that the licensed builder for my building work is as follows:
Builder's name	P & R Lawrence
Licence number	6972 Licence class B (08 for owner builder
Signature of builder	e / /

If the builder has not been selected at the time of making this application a separate C3 form should be used later to provide these details to the certifier

### **IMPORTANT NOTICE TO OWNER**

Please read the warnings on page 4 of this form before signing

**Privacy notice** 

Signature of owner

The personal information on this form is being collected to enable a suitable auditing and compliance role of builders and certifiers by the Government appointed Auditor and to provide statistical information to the Australian Bureau of Statistics on building matters.

### Part B - Certifier to complete

Describe each item of building work in this building approval	BCA Occupancy class	BCA Construction type	Area (m²)	Number of storeys	Cost of works (Refer building note 25)
Alterations to Residence & Bay     Window	1a	N/A	2	1	_
2.					
3.					
4,					
5.					
6.					
lf more than 6 items, please attach further deta	ils	L			
Building Approval					
the  Construction Industry Training Levy: applies  Payment date 18	determined f	ee of Ye	s, and ti		are payment details
Builder Details					
I have checked the builder details notified to Building Controller in accordance with the B restrictions, endorsements and date of expi described in this application	uilding Act	that in my	opinion	(checked	the licence-class,
Residential Building-Statutory Warranties, Insu Building Act 1972)	rance and Fi	delity Certi	ficates (	where applic	cable as required by the
hereby advise the Buildng Controller that in certificates in respect of the building work a provisions of the Building Act and provide th	s described	in this ap	plicatio	n that com	plies with the relevant
	e Attach				

Policy/Certificate number

Insured value | \$

### **Entitlement to Act as a Certifier**

In performing services as a certifier in relation to this work I am not in breach my entitlement to act as a certifier in accordance with the Construction Practitioners Registration Act 1998.

This building approval is subject to an alte	rnative solution under the BCA	Yes	$\checkmark$	No

Signature of Certifier	Date 10 / 8 /2005
Name 4	tration No.   B14