Fire S	al / Supplementary afety Statement mmental Planning and Assessment Regulations 2000 b, Clauses 175, 176, 177, 178, 179, 180, 181
TYPE OF STATEMENT	Annual Supplementary
ANNUAL STATEMENT	
Name of Owner/Agent	I,
Address	Of Postcode
	Certify:
	(a) That each essential fire safety measure specified in this statement has been assessed by a properly qualified person and was found, when it was assessed, to be capable of performing:
	 (i) In the case of an essential fire safety measure applicable by virtue of a fire safety schedule, to a standard no less than that specified in the schedule, or (ii) In the case of an essential fire safety measure applicable otherwise than by virtue of a fire safety schedule, to a standard no less than that to which the measure was originally designed and implemented, and
	(b) The building has been inspected by a properly qualified person and was found, when it was inspected, to be in a condition that did not disclose any grounds for a prosecution under Division 7 of Part 9 of the Environmental Planning and Assessment Regulation 2000, and
	(c) The information contained in this statement is, to the best of my knowledge and belief, true and accurate.
SUPPLEMENTARY STATEMENT	NOTE: FOR CRITICAL FIRE SAFETY MEASURES ONLY
Name of Owner/Agent	I,
Address	Of Postcode
	Certify: (a) That each critical fire safety measure specified in this statement has been assessed by a properly
	(a) That each childra me safety measure specified in this statement has been assessed by a property qualified person and was found, when it was assessed, to be capable of performing to a standard not less than that required by current fire safety schedule for the building for which the statement is issued, and
	(b) The information contained in this statement, is to the best of my knowledge and belief, true and accurate.
	FALSE OR MISLEADING STATEMENT (Clause 283 of the Environmental Planning and Assessment Regulation 2000) A person is guilty of an offence if the person makes any statement, knowing it to be false or misleading in an important respect, in or in connection with any document lodged with a consent authority or certifying authority for the purpose of the Environmental Planning and Assessment Act 1979 or the abovementioned Regulation.

		Part (eg warehouse, factory or shop, residential flat building) House/Unit No. Or Name	IDENTIFICATION OF BUILDING
		DP or SP	
		Street & Suburb	
		Name	OWNER'S DETAILS
		Address	
		Email	
acsimile	Facsimile	Phone	
acsimile	Facsimile	House/Unit No. Or Name Lot/Section & DP or SP Street & Suburb Name Address Email	

ESSENTIAL/CRITICAL FIRE SAFETY MEASURES Note: Date of assessment of each measure is to be NOT older than 3 months prior to the date of this Certificate. (THIS SECTION <u>MUST</u> BE COMPLETED IN FULL)						
Fire Safety Measure	St	andard of Performa (eg AS2444-2001)		Date of Assessment	Name & Address of Person by Whom Service was Inspected or Tested	
DATE ON WHICH BUILD OF BUILDING WAS IN		Dated this	day of	20		

	Owner/Agent			
SIGNATURE				
DATE OF STATEMENT	Dated this	day of	20	
OF BUILDING WAS INSPECTED	Dated this	day of	20	

- An administration fee of \$80.00 (or \$125.00 if the building is subject to an alternative solution) is applicable upon lodgement of this Statement to Council.
- A significant penalty can be imposed for each week the completed Statement has not been submitted (\$500 per week).
- You must forward a copy of this Statement, together with the relevant Fire Safety Schedule, to the Council and The Commissioner of Fire & Rescue Unit NSW, Building Compliance Unit at Locked Bag 12 Greenacre NSW 2190 or email: <u>AnnualFireSafetyStatements.nswfb@fire.nsw.gov.au</u>.
- A copy of this statement, together with the relevant Fire Safety Schedule, must be prominently displayed in the building. Failure to do so may result in a \$100 Penalty.