FORM
TRIM 14/60033

(SD-FO-245) AGREEMENT FOR CERTIFICATION WORK

DETAILS OF CERTIFYING AUTHORITY

Griffith City Council
1 Benerembah Street (PO Box 485)
GRIFFITH NSW 2680
Telephone 02 6962 8100
Email: admin@griffith.nsw.gov.au

Accredited Certifiers:

Anthea Crack	BPB 2482
Royce Johns	BPB 3362
David Tamlyn	BPB 1261
Craig Filmer	BPB 0945

INSURANCE DETAILS

Statewide Mutual Liability Scheme – 000736 – Valid to 30 June 2020 (Anthea, Royce & David)
JUA Underwriting Agency Pty Ltd – 190478497 – Valid to 6 April 2020 (Craig)

CLIENT DETAILS

Name: _____

Address: _____

Contact Number: _____

Email address: _____

PARTICULARS OF CERTIFICATION WORKS (please tick)

- ☐ Issue of a compliance certificate
- ☐ Issue of a construction certificate
- ☐ Issue of an occupation certificate
- ☐ Act as Principal Certifying Authority
- ☐ Issue of a Complying Development Certificate
- ☐ Issue certificate of compliance / non-compliance for swimming pool

PARTICULARS OF DEVELOPMENT

Description: _____

Address: _____

Lot & DP: _____

IS THIS WORK SUBJECT TO ANY RELEVANT DEVELOPMENT CONSENT OR CERTIFICATE

- ☐ Yes - If yes, please complete the following
- ☐ No
- ☐ Development Application — Approval No: _____
- ☐ Construction Certificate — Certificate No: _____
- ☐ Complying Development Certificate — Certificate No: _____

Name of the consent authority for the above: _____

Please list particulars of any plans, specifications or other documents the subject of any consent related to the above

_____

_____

_____

_____

_____

INSPECTIONS

Inspections shall be carried out by one of the accredited certifiers listed at the top of the page, subject to availability and level of accreditation. The accredited certifiers employed or engaged by Council may change without notice prior to the completion of the certification works identified in this contract.

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FEES AND CHARGES

As per Current Revenue Policy

Unforeseen contingencies or additional inspections will be charged in accordance with Council's current Revenue Policy. Any invoice for such is to be paid within 21 days after the completion of that work.

EXECUTION OF CONTRACT

Date of Contract: _____

Print name (Client): _____

Signature (Client): _____

Print Name (Certifying Authority): _____

Signature (Certifying Authority):