

Notice of Commencement & Appointment of the Principal Certifying Authority

under *Environmental Planning and Assessment Act 1979* sections 81A (2) (b) (ii) or (c) , or (4) (b) (ii) or (c) , 86 (1) and (2). (Form 7 E P Act Regulation 1994)

Expiry Date: 30 June 2010

About this form

Use this form to:

- Advise Council who has been appointed as the Principal Certifying Authority (PCA)
- Pay security bonds, s94 contributions etc. required by development consent conditions to be paid before any work commences
- Advise Council who the builder or person in charge of the work is
- Supply to Council a copy of the Home Building Act Insurance Certificate for residential building work
- Advise Council of the Date of Commencement of Building or Subdivision Work.

Documentation

Woollahra Municipal Council's PCA Agreement explains the process involved in appointing Council as the PCA. Ask us for a copy.

Other Approvals

You must not only comply with Council Conditions of Development Consent you must also obtain relevant approvals from Sydney Water and may require approvals of other authorities prior to commencing work. Where residential building work is involved Home Warranty Insurance is also required.

Lodgement & Fees

See page 3.

Any questions

Phone Customer Service on (02)9391 7000, or call in personally (see page 3)

Applicant and site details

1. Applicant's name, address and contact details.

Title: Mr Mrs Miss Ms Other:.....

Family name (or company):.....

Given names (or ACN):

Postal address:.....

..... Post Code:.....

Phone (B) (....) Fax (....).....

Phone (H) (....) E-mail:.....

Contact person (Only if a company etc)

2. Location and title description of the property

Unit, shop or suite:..... Street No:..... Street:.....

Suburb:

Lot(s):..... Section:

Deposited Plan(s):..... Strata plan:.....

Other:.....

Get these details from rate notices, property deeds, or Council property maps.

This will help us to correctly identify the land

OFFICE USE ONLY

Fee description	Fee	Account Code	Receipt No.	Date	<input checked="" type="checkbox"/> Cashier
Lodgement fee	\$30.00	53			

Note: There is no GST on this fee, which is set by IPART.

Development approval details

3. **Description of development**

4. **Type of work** Building Subdivision

5. **Development Consent** Development Consent No:..... Determination Date:/...../.....

6. **Construction Certificate** Construction Certificate No:..... Issue Date:/...../.....

Appointment of Principal Certifying Authority

7. **Principal Certifying Authority** Title: Mr Mrs Miss Ms Other:

Family name (or company):.....

Given names (or ACN):

Postal address:

..... Post Code:

Phone (1) (....) Fax (....)

Phone (2) (....) E-mail:.....

Contact person (Only if a company etc)

8. **Compliance with Development Consent** Yes No

Conditions may include the payment of security, bonds, and s94 contributions. The endorsement of plans by Sydney Water or other authorities. Ensure you have complied with all requirements of consent.

The applicant by answering Yes is certifying that all conditions have been satisfied. If all conditions have not been satisfied Council may without warning:

- Issue Penalty Infringements Notices for each breach of the Act
- Prosecute the Applicant for making false or misleading statements
- Prosecute any person acting otherwise that in compliance with development consent
- Order or seek orders from the Land & Environment Court to cease all work until compliance is satisfied

Have all conditions required to be satisfied prior to the commencement of work be satisfied ?

Builder and Home Building Act 1989

9. **Builder or other person in charge of work** Title: Mr Mrs Miss Ms Other:.....

Family name (or company):.....

Given names (or ACN):

Postal address:

..... Post Code:

Phone (1) (....) Fax (....)

Phone (2) (....) E-mail:.....

Licence/Permit No.:.....

Contact person (Only if a company etc)

10. **Certificate under Part 6 of Home Building Act 1989** Yes No

Has the Principal Certifying Authority been provided with a copy of the Home Warranty Insurance Certificate under Part 6 of the Home Building Act 1989. Note, This insurance is not required for Owner Builders however undertaking work without Home Warranty Insurance the Owner accepts the risk and insurance must be taken out if the Owner seeks to sell the residence within 7 years of the completion of work.

Please attach the Home Owners Warranty Insurance Certificate

▼ Date work is to commence

11. Date work is to commence

This Notice of Commencement must be lodged with Council not less than 2 days before this commencement date.

...../...../.....

▼ Signatures

12. Owner's consent

As owner of the land to which this application relates, I consent to this application. I also give consent for authorised Council officers to enter the land to carry out inspections.

Must be signed by the owner of the land. If more than one owner, every owner must sign.

If the owner is a company or owner's association must be signed by a director under common seal.

☒ Signature: Date:

If you are signing on the owner's behalf as the owner's legal representative, please state the nature of your legal authority and attach documentary evidence.

.....
(eg, power of attorney, executor, trustee, company director)

13. Your declaration

I declare that all the information given is true and correct.

☒ Signature: Date:

▼ How to lodge this application

Address the application to:

The General Manager
Woollahra Municipal Council

You can send it to us by any of the following methods

Post: PO Box 61
Double Bay 1360
DX: DX 3607 Double Bay

Courier or personal delivery: Council Chambers
536 New South Head Road
Double Bay NSW 2028

How to contact us by phone, fax or electronically

Phone: (02) 9391 7000
Fax: (02) 9391 7044
Email: Records@woollahra.nsw.gov.au
Web: www.woollahra.nsw.gov.au

Who to contact: The Building and Compliance Officer handling your development.

If you wish to discuss a proposal with one of our Building and Compliance Officers, it's essential that you arrange an appointment.

Fees

Where Council is appointed the PCA, a separate agreement form is to be completed and the fees are calculated on a scale based on the contract value of the work. Lodgement of this form requires the payment of a **\$30 statutory lodgement fee**.

Payment methods

In Person

Payment can be made at our Customer Service Centre by the following methods: cash, EFTPOS, cheque, Money Order (make payable to Woollahra Council) or by credit card — American Express, Diners Club, MasterCard or Visa. Credit card payment will incur a processing fee.

By Mail

For credit card payments, please complete the attached "Credit Card Payment" form.

For cheque payments, please make payable to Woollahra Council.

Acknowledgement

You will receive a receipt specifying the amount of fees paid.

Making a personal visit?

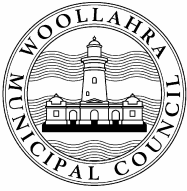
Woollahra Council is located at 536 New South Head Road, Double Bay. We look forward to seeing you.

Bus or Rail: Train to Edgecliff and take the bus or walk from the interchange at the Edgecliff Centre.

Parking: Short term customer parking spaces are available on site. On street parking in nearby streets is also available.

Privacy notification

The personal details requested on this form are required under the *Environmental Planning and Assessment Act 1979* and will only be used in connection with the requirements of this legislation. Access to this information is restricted to Woollahra Municipal Council officers and other people authorised under the Act. Council is to be regarded as the agency that holds the information. You may make application for access or amendment to information held by Council. You may also request Council to suppress your personal information from a public register.



Credit Card Payment Form

All credit card payment will incur a processing fee currently 1%

Payments should be sent to: Woollahra Council
536 New South Head Road
DOUBLE BAY NSW 2028

OR

PO Box 61
DOUBLE BAY NSW 1360

OR

DX 3607 DOUBLE BAY

Credit card payment

This matter will not be processed until the credit card payment has been authorised

Tick Applicable Credit Card	<input type="checkbox"/> AMERICAN EXPRESS	<input type="checkbox"/> DINERS CLUB	<input type="checkbox"/> MASTERCARD	<input type="checkbox"/> VISA														
Full Name on Credit Card																		
Credit Card No.				--					--					--				
Card Expiry Date			--			Total Amount Paid	\$											
Cardholder's Signature																		
Date					Contact Phone No.													

Reason for payment

Please indicate in this section the reason for the payment and any other applicable information.

Payment For

Council Reference Eg. DA No.etc

Address (where applicable)

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PRIVACY NOTIFICATION

The personal details requested on this form are being collected, and will only be used for, the purpose of processing your payment. The supply of information by you is voluntary. If you cannot provide or do not wish to provide the information sought, the Council will not be able to process your payment. Access to the information is restricted to Council officers. Council is to be regarded as the agency that holds the information. You may make application for access or amendment to information held by Council.

OFFICE USE ONLY	Payment Processed	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	Cashier	
	Date	