

Occupation Certificate Application Form



Document Number:

Section 6.9 of the Environment Planning & Assessment Act 1979

Before an Occupation Certificate can be issued, Council must be satisfied that:

- A Development Consent or Complying Development Certificate is in force
- A Construction Certificate has been issued
- You must attach the final or interim Fire Safety Certificate unless this is for a class 1a or class 10 building
- You must attach other outstanding certificates as required

Associated Development

DA/CDC Number	_____ / _____	Date of Determination	___ / ___ / ____
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Applicant Details: Please only complete either Section A – Private OR Section B - Company

Section A – Applicant Details - Private

Ms/Mr/Mrs/ Other (please circle)	Given Name(s)		Surname	
Street Address				
Mailing Address (if different)				
Daytime Telephone No. (Home/Work)		Mobile No.		
Email Address		Fax No. (Home/Work)		

OR

Applicant Details: Please only complete either Section A – Private OR Section B - Company

Section B – Applicant Details - Company

Company Name (if applicable)				
Street Address				
Mailing Address (if different)				
Contact Person				
Daytime Telephone No. (Home/Work)		Mobile No.		
Email Address		Fax No. (Home/Work)		

Property Details

Lot No(s)		Section		DP/SP Number		
Unit No.		Street No.		Street		
Suburb					Postcode	

Applicant's Signature

Applicant's Signature		Date	___ / ___ / ____
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Privacy Statement

The personal information provided on this form (including your name and other details) will be handled in accordance with the *Privacy and Personal Information Protection Act 1998* and may be available to the public under various legislation. Refer also to the **Privacy Statement** on Council's website.

Eastgardens Customer Service Centre
Westfield Eastgardens
152 Bunnerong Road
Eastgardens NSW 2036, Australia
ABN 80 690 785 443 Branch 004

Rockdale Customer Service Centre
444-446 Princes Highway
Rockdale NSW 2216, Australia
ABN 80 690 785 443 Branch 003
DX 25308 Rockdale

Phone 1300 581 299
T (02) 9562 1666 F 9562 1777
E council@bayside.nsw.gov.au
W www.bayside.nsw.gov.au

Postal address: PO Box 21, Rockdale NSW 2216



Telephone Interpreter Services - 131 450

Τηλεφωνικές Υπηρεσίες Διεμνηνών

بخدمة الترجمة الهاتفية

電話傳譯服務處

Служба за преведување по телефон

Owner's Consent				
I/We consent to the making of this application				
Owner(s) Surname 1		Given Name(s)		
Property Owner's Signature		Date	___ / ___ / _____	
Owner(s) Surname 2		Given Name(s)		
Property Owner's Signature		Date	___ / ___ / _____	
Owner(s) Surname 3		Given Name(s)		
Property Owner's Signature		Date	___ / ___ / _____	

Access Details	
Name	Phone No.
Access Instructions (if any)	

Development Details				
Why are you applying for this certificate?				
<input type="checkbox"/>	To enable occupation of a new building, or new additions to an existing building			
How was the building authorised?				
DA Consent No.		Date	___ / ___ / _____	Issued By
Const Cert No.		Date	___ / ___ / _____	Issued By
OR				
Complying Cert No		Date	___ / ___ / _____	Issued By
<input type="checkbox"/>	To enable a change of use to an existing building			
How was the change of use authorised?				
DA Consent No.		Date	___ / ___ / _____	Issued By
OR				
Date of State Environmental Planning Policy No. 4 approval			___ / ___ / _____	

Building Details				
What type of Building is it?				
<input type="checkbox"/>	Dwelling	<input type="checkbox"/>	Outbuilding	<input type="checkbox"/>
<input type="checkbox"/>	Institution	<input type="checkbox"/>	Warehouse	<input type="checkbox"/>
<input type="checkbox"/>	Factory	<input type="checkbox"/>	Shop	<input type="checkbox"/>
<input type="checkbox"/>	Residential Flat	<input type="checkbox"/>	Office	<input type="checkbox"/>
<input type="checkbox"/>	Other			
Please note: a Fire Safety Certificate must be applied for all applications except for Dwellings and Outbuildings				

Certificate Details				
Is this an Interim or Final Certificate?				
<input type="checkbox"/>	Interim	<input type="checkbox"/>	Final	
Has a Final already been issued?				
<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	If yes, Certificate No.
<input type="checkbox"/>	Yes (all of the building	<input type="checkbox"/>	No, just part	Which part?
What is the total floor area for which the certificate will be issued?				

Certificate Details Cont.

Are you applying for a Staged Occupancy?

<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	If yes, which stage?	
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Have all conditions of the Development Consent been satisfied?

<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
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Are you applying for a Security or Bank Guarantee, Footpath Damage Deposit or any other security deposit to be released?

<input type="checkbox"/>	Yes	<input type="checkbox"/>	No
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Have you discussed this application with a Council Officer?

Declaration

I apply for an Occupation Certificate for the building referred to in this application. I declare that all the information given is true and correct.

Applicant's Signature		Date	___ / ___ / _____
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<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	If yes, who was it?	
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Payment Details

Office use Only	\$	Date	Receipt No
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