

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.

Postal address

PO Box 21, Rockdale NSW 2216
ABN 80 690 785 443

Bayside Customer Service Centres

Rockdale Library, 444-446 Princes Highway, Rockdale
Westfield Eastgardens, 152 Bunnerong Road, Eastgardens

E council@bayside.nsw.gov.au

W www.bayside.nsw.gov.au

T 1300 581 299 | 02 9562 1666

Telephone Interpreter Services: 131 450

Τηλεφωνικές Υπηρεσίες Διερμηνέων

بخدمه 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"/>	Office	<input type="checkbox"/>	Residential Flat	<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	<input type="checkbox"/>	No	Date
Do you want a Certificate for all of the Building?				
<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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