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APPLICATION FORM FOR EXEMPT DEVELOPMENT CERTIFICATE

SUBJECT LAND

Address _____

Lot No,DP,SP,vol/fol.etc _____

APPLICANT

Name/ Company _____

Address _____

Post Code _____

Contact numbers Phone _____ Mobile _____

Fax No _____ Email _____

Signature of Applicant (Capacity) _____ Date _____

CONSENT OF OWNER(S)

Name(s)/ Company _____

Address _____

Contact numbers Phone _____ Mobile _____

Fax No _____ Email _____

Signature of Registered owner(s) _____

Company stamp or seal to be affixed if applicable
(If agent provide documentary evidence such as Power of Attorney etc as evidence of commission)
Date _____

DESCRIPTION OF PROPOSED DEVELOPMENT

Estimated cost of work \$ _____ Existing use of Site: _____

_____ *Example Office/ Retail etc.* _____

Gross floor Area of building m²: (Existing) _____ (Proposed) _____

Site Area m² _____ Number of storeys (including underground storeys) _____

Please attach relevant Plans and Specifications from the attached list.

List of documents accompanying this application:

- o _____
- o _____
- o _____
- o _____
- o _____
- o _____
- o _____
- o _____

CONSTRUCTION MATERIALS

Walls:		Roof:		Floor:	
Brick Veneer		Aluminium		Concrete	
Full Brick		Concrete		Timber	
Single Brick		Concrete tile		Other	
Concrete Block		Fibrous cement		Unknown	
Concrete/ masonry		Fibreglass			
Concrete		Masonry			
Steel		Shingle tiles			
Fibrous cement		Slate			
Hardiplank		Steel			
Timber/ weatherboard		Terracotta		FRAME	
Cladding-aluminium		Other		Timber	
Curtain glass		unknown		Steel	
Other				Other	
Unknown				unknown	

Schedule to Application for Certification &/or PCA

Schedule of existing/proposed or modified Fire Safety measures
(for any existing building and the land on which it is situated)

Item No.	Proposed / Existing Measure	Is this measure installed in the building?	If yes, enter the current standard of performance (eg: BCA and Aust Stand)	Proposed alteration of existing measure (✓)
		Yes/ No		
1.	Access Panels, doors and hoppers to fire resisting shaft			
2.	Automatic fail safe devices			
3.	Automatic fire detection and alarm system			
4.	Automatic fire suppression system (sprinkler)			
5.	Automatic fire suppression system (others - specify)			
6.	Emergency lighting			
7.	Emergency lifts			
8.	Emergency warning and intercommunication system			
9.	Exit signs			
10.	Fire alarm monitoring			
11.	Fire control centres and rooms			
12.	Fire dampers			
13.	Fire Doors			
14.	Fire hydrant systems			
15.	Fire seals (protecting openings in fire resisting components of the building)			
16.	Fire shutters			
17.	Fire windows			
18.	Hose reel system			
19.	Light weight construction			
20.	Mechanical air handling systems			
21.	Perimeter vehicle access for emergency vehicles			
22.	Portable fire extinguishers			
23.	Pressurising system			
24.	Safety curtains in proscenium openings			
25.	Smoke and Heat Vents			
26.	Smoke dampers			
27.	Smoke detectors and heat detectors			
28.	Smoke doors			
29.	Solid-Core doors			
30.	Stand-By Power Systems			
31.	Wall wetting sprinkler and drencher systems			
32.	Warning and operational signs			
33.	OTHERS – Specify			

This is an accurate statement of all the existing fire safety schedule implemented in the whole building and the land on which it is situated.

Signed _____
(owner/agent)

Name _____
Date _____