



# ANNUAL FIRE SAFETY STATEMENT

<b>Date Received:</b> _____	<b>Office use only</b>
<b>Parcel No:</b> _____	<b>DA or CDC No:</b> _____

The owner of a building, or the owner's agent (who has power to sign on owner's behalf) needs to provide to Council:

- An annual fire safety statement each year where an essential fire safety measure applies,
- A supplementary fire safety statement, as often as set out in the current fire safety schedule for the building, where a **critical** fire safety measure applies.

In either case, you can use this form to do so.

A copy of the certificate also needs to be given to the Commissioner of Fire & Rescue NSW, and **displayed in the building in a prominent position**. To complete this form, please place a cross in the relevant boxes (☒) and fill out the white sections as appropriate.

**DETAILS OF  
BUILDING BEING  
CERTIFIED**

**Name of the Owner of the building:**

First Name/Company Name: \_\_\_\_\_

Family Name: \_\_\_\_\_

Contact Phone Number: \_\_\_\_\_

**Address of the building:**

Lot (s) \_\_\_\_\_ Section \_\_\_\_\_ D.P. \_\_\_\_\_

House No. \_\_\_\_\_ Street \_\_\_\_\_

Property Known As: \_\_\_\_\_

Suburb \_\_\_\_\_ Postcode \_\_\_\_\_

Nearest Cross Street: \_\_\_\_\_

**This certificate is for the whole building. Description of the building/s**

**ASSESSMENT OF  
FIRE SAFETY  
MEASURES**

**List of each essential fire safety measure specified in the Fire Safety Schedule for the building.**

Measure	Standard of performance required by the fire Safety Schedule	Date of Assessment
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**DETAILS**

If you need more space, please attach additional pages

**INSPECTION OF  
THE BUILDING**

Date the building was inspected in relation to fire safety notices, fire exits and paths of travel to fire exits. \_\_\_\_\_

**CERTIFICATION**

**Annual Fire Safety Statement**

I \_\_\_\_\_ of \_\_\_\_\_

Being the owner of the building described above, or the agent of the owner (who has the power to sign on owner's behalf), certify that:

- Each of the essential fire safety measures listed above has been assessed by a properly qualified person; and
- Each essential fire safety measure was found, when assessed:
  - Where an essential fire measure applies because it is specified in the fire safety schedule for the building, to be capable of performing to at least the standard set out in the schedule; or
  - Where an essential fire safety measure applies although it is not specified in a fire safety schedule for the building, to be capable of performing to at least the standard for which the measure was originally designed and implemented; and
- A properly qualified person has inspected the building and found, when it was inspected, that no fire safety offences under the Environmental Planning and Assessment Regulation 2000 in relation to fire safety notices, fire exits and paths of travel to fire exits had been committed;
- The information contained in this statement is true and accurate to the best of my knowledge and belief.

**Supplementary Fire Safety Statement**

I \_\_\_\_\_ of \_\_\_\_\_

Being the owner of the building described above, or the agent of the owner (who has the power to sign on owner's behalf), certify that:

- Each of the essential fire safety measures listed above:
  - Has been assessed by a properly qualified person, and
  - Was found, when it was assessed by that person, to be capable of performing to at least the standard required by the current fire safety schedule for the building;
- The information contained in this statement is true and accurate to the best of my knowledge and belief.

**PRIVACY POLICY**

You need to provide the information in this certificate to the certifying authority if you are applying for an occupation certificate. You also need to give the information to the Council and the Commissioner of Fire & Rescue NSW if a fire safety order has been made for the building once you have satisfied that order. If you do not supply a fire safety certificate as required, you will be in breach of the Environmental Planning and Assessment Act, 1979 and you could be found guilty of an offence and/or required to take further action. Please contact the Council if the information you have provided in this certificate is incorrect or changes.

**NEW SOUTH WALES FIRE BRIGADE REQUIREMENT**

A copy of this statement was forwarded to Fire & Rescue NSW on: \_\_\_\_\_  
(Fire & Rescue NSW, Community Safety Division, Building Compliance Unit, Locked Bag 12, GREENACRE NSW 2190)

**SIGNATURE**

The owner of the building, or the owner's agent (who has power to sign on owner's behalf), must complete and sign the certificate

Name \_\_\_\_\_ Signature \_\_\_\_\_

Address \_\_\_\_\_

Capacity in which you are signing if you are not the owner of the building \_\_\_\_\_