Administration Centre 86 Avoca Road, Wakeley Telephone: (02) 9725-022 Mail: PO Box 21 Fairfield NSW 1860 Email: mail@fairfieldcity.nsw.gov.au www.fairfieldcity.nsw.gov.au

## SMOKE ALARMS RESIDENTIAL ACCOMMODATION CERTIFICATE



Installation Report			
1. Job address			
House / unit no.	Lot:	Section:	DP / SP:
Street:			
Suburb:			
2. Application number			
Development Application No.: /		Construction Certificate Application No.: /	
Complying Development Certificate No. : /			
3. Applicant details			
l,(print name)		(liana a number if annii abia)	(a.u.a.u.b.:ilala.ua.ua.uait)
(prin	t name)	(licence number if applicable)	(owner builders permit)
of			
(company name)			
(company address)			
☐ Hereby certifiy that the Smoke Alarm/s have been installed in accordance with the Building Code of Australia - Part 3.7.2 Housing Provisions Reference AS 3786 - 1993 and AS 3000.			
Australia - Fart 3.7.2 Housing Frovisions Reference Ao 3700 - 1993 and Ao 3000.			
Type of system	☐ New	☐ Modification of system [	Addition to existing
(tick where applicable)	_	_	_
Leastion of detector (wire	d to maine newer) 🔲 Hell	☐ Bedroom ☐ Other	
(tick where applicable)	d to mains power)   Hall	☐ Bedroom ☐ Other	· · · · · · · · · · · · · · · · · · ·
Number of detectors :	Date	of installation and testing:	/
Comments / notes :			
Contact details :			
oomaat actans .	(home / work)	<del></del>	(mobile)
-	(email address)		
Signature :		C	Date ://