

Application for Building Compliance Notice

Economy, Planning & Environment
Development Compliance

City Development

PO Box 5042 GOLD COAST MC QLD 9726

P: 5582 8184 F: 5596 3653

E: mail@goldcoast.qld.gov.au

W: cityofgoldcoast.com.au

Residential Services (Accreditation) Act 2002 Section 29

(Application form for a building compliance notice, issued by the Local Government, stating that the premises comply with the prescribed building requirements for a residential service)

Please use **BLOCK LETTERS** and complete all details in full

Privacy statement

Council of the City of Gold Coast (Council) is collecting your personal information in order to provide the services requested, perform associated Council functions and services, and to update and maintain Council's customer information records. Your information is handled in accordance with the **Information Privacy Act (Qld) 2009** and may only be accessed by Councillors, Council employees and authorised contractors. Unless authorised or required by law, we will not provide your personal information to any other person or agency. For further information go to: cityofgoldcoast.com.au/privacy.

Council may also use your personal information in order to contact you to provide you with information regarding Council functions and services. If you do not wish to receive such information please opt out using the unsubscribe link in the communication material sent to you.

Building Compliance Inspection Process

Gaining or renewing accreditation as a residential services building includes demonstrating that the premises in which the residential service is offered complies with the prescribed building requirements in MP 5.7 - Residential Services Building Standard of the Queensland Development Code.

1. Applicant (service provider) details	
Applicant type	<input type="checkbox"/> Individual applicant <input type="checkbox"/> Corporate applicant
Applicant name	
ACN (if corporate applicant)	
Contact person name (if corporate applicant)	
Residential address / registered office address	
Postal address	
All correspondence will be mailed to this address	
Primary phone	Alternative phone
Email	

2. Business details	
• Complete this section if the applicant is trading as a business.	
Business name	
ABN	
Is the business name to be used in correspondence?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Primary phone	Alternative phone
Email	

3. Fees	
Fee name <small>[√] please tick applicable fee(s)</small>	Amount
<input type="checkbox"/> Small – medium 1 to 2 storey building less than 500m ²	\$1192.00
<input type="checkbox"/> Small – medium 1 to 2 storey building, greater than 500m ² , each additional 250 m ² or part thereof over 500 m ²	\$234.00
<input type="checkbox"/> Large - 3 or more storey building less than 1,000 m ²	\$1665.00
<input type="checkbox"/> Large - 3 or more storey building, greater than 1000m ² , each additional 250 m ² or part thereof over 1,000 m ²	\$234.00

These fees are in accordance with the City's regulatory fees and non-regulatory charges. A copy of the City's regulatory fees and non-regulatory charges can be found on the City's website cityofgoldcoast.com.au

Payment options

- Business partner account (BP) – please complete details below
- Cash, cheque or credit card at any of the City's branch offices. For branch office locations and operating hours, please refer to the City's website cityofgoldcoast.com.au
- Cheque or money order by post to City of Gold Coast, PO Box 5042, Gold Coast MC QLD 9726. Please ensure that you provide adequate reference details or attachments to allow the cheque to be appropriately receipted.

Please be advised that payment by credit card will incur a surcharge.

Business partner name		Business partner number	
-----------------------	--	-------------------------	--

4. Property details	
Lot number	Registered plan type and number
Property address	
Building name (if applicable)	

5. Residential service details	
When was the building constructed?	
If unsure, which of the following best describes the age of the building? Tick applicable box.	
<input type="checkbox"/> Pre 1976	<input type="checkbox"/> 1976-1992
<input type="checkbox"/> Post 1992	
Gross floor area	m ²
Maximum number of persons who can be accommodated	Number of storeys
Please note that buildings where six or more residents reside will also require submission of a fire safety certificate from QFES ^{2}	Are residents provided with meals? <input type="checkbox"/> Yes <input type="checkbox"/> No
Will the service provider or associate ¹ be present during the building inspection?	
<input type="checkbox"/> Service provider <input type="checkbox"/> Associate <input type="checkbox"/> Neither	
Name of person to be present	Contact phone number
Reference	
¹ A person is an associate of a service provider if the person takes part in the management of a residential service for the service provider. This includes an executive officer of a corporation who takes part in the management of a residential service for the corporation.	
² Queensland Fire and Emergency Services	

6. Occupier's consent	
<ul style="list-style-type: none"> Completion of this section is required only if the applicant is not the occupier of the premises Completion of this section provides the occupier's permission for City officers to enter the property to undertake the building inspection. 	
Name (in full)	
Contact details (optional)	
Signature/s	Date

7. Checklist – Residential Services (Accreditation) application in the form approved	
The application form must be fully completed. The <i>Residential Services (Accreditation) Act 2002</i> section 29(2)(a) requires that the application must be in the form approved by the local government. An application will only be considered as having been received in the form approved by Council if all completed Items 1 – 5 are provided.	Office Use Only
Sample plans are included on the last page as a guide to the type of drawing standard and details required.	
<input type="checkbox"/> 1. Provide a copy of a certificate of classification to occupy the building	<input type="checkbox"/>
<input type="checkbox"/> 2. Provide a floor plan/s showing the following detail: Size of rooms Location of rooms Location and size of kitchen facilities Location and size of dining facilities Location of common areas both indoor and outdoor Location of emergency phone Location of smoke alarm/s	<input type="checkbox"/>
<input type="checkbox"/> 3. Provide written advice from a certified electrician of recent testing (within last 6 months) of early warning systems and emergency lighting [Note: This is necessary for the City to assess compliance with MP5.7 P10 (Early Warning System) and P11 (Emergency Lighting).]	<input type="checkbox"/>
<input type="checkbox"/> 4. Provide the completed and signed Compliance Checklist (starts on page 5 of this form).	<input type="checkbox"/> All sections completed and form signed
<input type="checkbox"/> 5. Pay the relevant fee	<input type="checkbox"/>

8. Declaration
I declare that:
<ul style="list-style-type: none"> The information provided in this form is complete and correct. I have read the privacy notice. I acknowledge that in the event the premises are not compliant at the time of inspection that a reinspection fee will be charged for

a subsequent inspection.

- All required information in Section 7 Checklist – Residential Services (Accreditation) application in the form approved has been provided.

I acknowledge that if the requirements in Items 1 – 5 are not fully completed, an Incomplete Application Notice may be issued by the City and the application will not be considered as having been received in the form approved by the local government and cannot be progressed until the notice is complied with. The decision period will not begin until the required information is submitted.

Signature		Date	
------------------	--	-------------	--

Lodging your Application

Applications can be lodged at one of our [customer service centres](#) where various payment options are available. If you are lodging by mail, a cheque for the correct amount must be attached and made payable to City of Gold Coast.

Notes

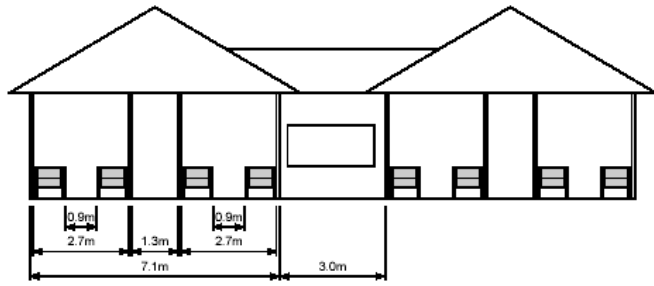
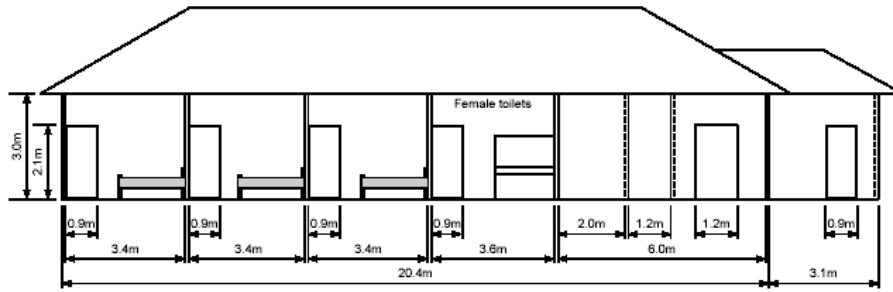
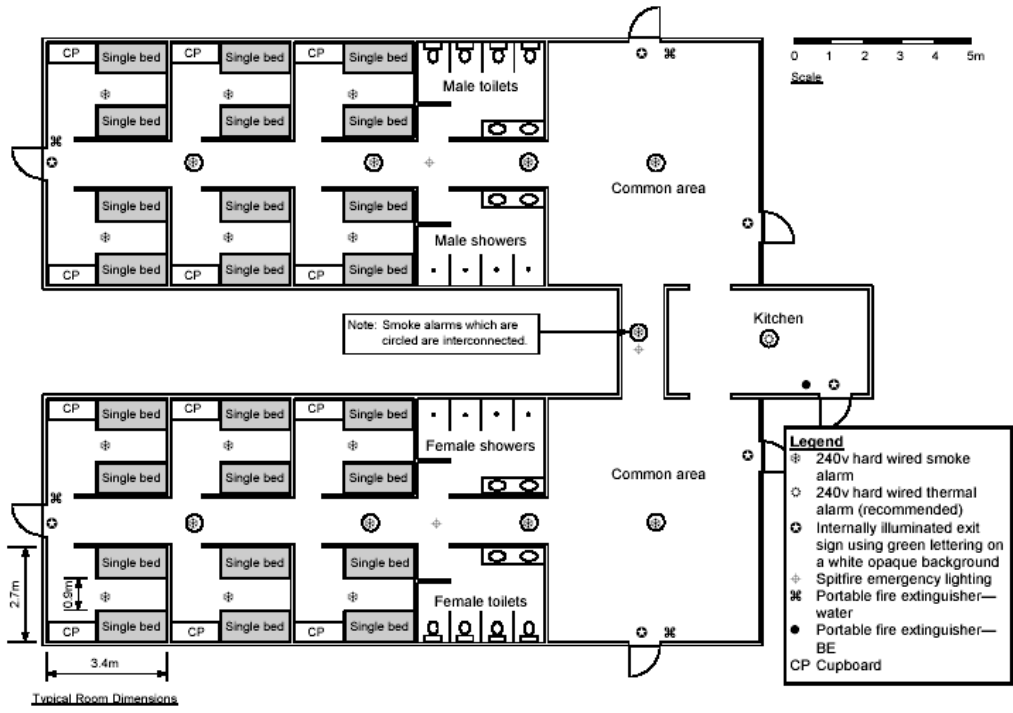
If Items 1 – 5 are not fully completed, you will receive an Incomplete Application Notice. The application will not be considered to have been received in the form approved by the local government until any outstanding information identified in the Incomplete Application Notice is provided. The decision period will not start until all information required by this approved form is received by the City of Gold Coast.

You should receive a Building Compliance Notice within 20 business days after the local government receives the application in the form approved (“the decision period”). If you do not receive a notice within the decision period you may appeal to a development tribunal established under the *Planning Act 2016*. The appeal must be made within 20 business days after the last day of the decision period. For more information on appeals contact the Registrar of the development tribunals on 07 3237 0403.

Office use only

Date received		Fee amount paid	
Received by		Receipt number	
Business partner name		Account number	
Business partner number		System code	<i>(if applicable)</i>
All documents in item 7. Checklist provided		All sections of compliance checklist (pages 5-22) completed	

Example Only



Item 4 – Compliance Checklist – to be completed by Applicant

Section 1 – Bedrooms

Performance Criteria		P4	OFFICE USE ONLY - DCO
Bedrooms must provide adequate personal space facilities for each resident.			
<p>Definition / Hint</p> <p>Unencumbered area means a clear circulation space no fixtures or fittings intruding within the space. Loose furniture (e.g. bed) can be included in the unencumbered areas.</p> <p>The unencumbered area is intended to deal with situations where there is an intrusion into the bedroom area, such as a stairway ducting of plumbing which limits accessibility to the whole of the room by the resident. Fixed beds and shelving would not be regarded as encumbrances on the floor areas provided the resident uses them.</p> <p>If the premises contain bedrooms that do not meet the dimensions, it may be acceptable to put aside private areas for those rooms. These private areas cannot be the common areas.</p>	<p>1. Does the unencumbered floor area of each bedroom equal or exceed:</p> <p><input type="checkbox"/> for a bedroom that accommodates one person; – 7.5m²</p> <p><input type="checkbox"/> for a bedroom that accommodates two people; – 11m²</p> <p><input type="checkbox"/> for a bedroom that accommodates three people; – 16.5m²</p> <p><input type="checkbox"/> for more than three people – 16.5m² + additional 5.5m² per additional person?</p> <p><i>Please provide details of the measurements of each room in the floor plan required by section 7 of the application form.</i></p> <p>Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution)</p> <p>Alternative Solution or Action to rectify:</p>	A4(a)	<p>Complies <input type="checkbox"/></p> <p>Does not comply <input type="checkbox"/></p> <p>Photos taken <input type="checkbox"/></p> <p>Notes <input type="checkbox"/></p>
	<p>2. Where more than one person sleeps in a room, is a minimum of 900mm provided between beds?</p> <p>Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution)</p> <p>Alternative Solution or Action to rectify:</p>	A4(b)	<p>Complies <input type="checkbox"/></p> <p>Does not comply <input type="checkbox"/></p> <p>Photos taken <input type="checkbox"/></p> <p>Notes <input type="checkbox"/></p>
	<p>3. Is each bedroom accessible without passing through any other bedroom?</p> <p>Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution)</p> <p>Alternative Solution or Action to rectify:</p>	A4(c)	<p>Complies <input type="checkbox"/></p> <p>Does not comply <input type="checkbox"/></p> <p>Photos taken <input type="checkbox"/></p> <p>Notes <input type="checkbox"/></p>
	<p>4. Is each bedroom provided with a general purpose outlet?</p> <p>Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution)</p> <p>Alternative Solution or Action to rectify:</p>	A4(d)(i)	<p>Complies <input type="checkbox"/></p> <p>Does not comply <input type="checkbox"/></p> <p>Photos taken <input type="checkbox"/></p> <p>Notes <input type="checkbox"/></p>
<p>General purpose outlet means a power point.</p>			

<p>Protective hanging space means an enclosed cupboard or wardrobes. Alternative solutions could include additional storage space.</p>	<p>5. Is each bedroom provided with a protective hanging space of 0.6m per resident for clothing?</p> <p><i>Please provide details of the measurements of the storage facilities in the floor plan requested in the application checklist.</i></p> <p>Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution)</p> <p>Alternative Solution or Action to rectify:</p>	<p>A4(d)(ii)</p>	<p>Complies <input type="checkbox"/></p> <p>Does not comply <input type="checkbox"/></p> <p>Photos taken <input type="checkbox"/></p> <p>Notes <input type="checkbox"/></p>
<p>Storage facilities are things like bedside tables, chest of draws etc.</p>	<p>6. Is each bedroom provided with storage facilities for each resident that has a minimum dimension of 300mm wide and 450mm deep and 900mm high?</p> <p><i>Please provide details of the measurements of the storage facilities in the floor plan requested in the application checklist.</i></p> <p>Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution)</p> <p>Alternative Solution or Action to rectify:</p>	<p>A4(e)</p>	<p>Complies <input type="checkbox"/></p> <p>Does not comply <input type="checkbox"/></p> <p>Photos taken <input type="checkbox"/></p> <p>Notes <input type="checkbox"/></p>
	<p>7. Is bedding provided for each resident that includes:</p> <ul style="list-style-type: none"> • a bed frame or base; and • a mattress; and • a mattress protector? <p>Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution)</p> <p>Alternative Solution or Action to rectify:</p>	<p>A4(f)</p>	<p>Complies <input type="checkbox"/></p> <p>Does not comply <input type="checkbox"/></p> <p>Photos taken <input type="checkbox"/></p> <p>Notes <input type="checkbox"/></p>
<p>Performance Criteria</p> <p>The undetected entry of vermin into buildings must be prevented to minimise the risk of the spread of the disease.</p>		<p>P8</p>	
<p>Vermin means rats, mice, guinea pigs and other rodents capable of carrying disease and that is not protected.</p>	<p>8. Is every floor, wall, partition, ceiling, roof, and every ancillary fitting thereto of every bedroom constructed and maintained to prevent the undetected entry of vermin?</p> <p>Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution)</p> <p>Alternative Solution or Action to rectify:</p>	<p>A8(a)</p>	<p>Complies <input type="checkbox"/></p> <p>Does not comply <input type="checkbox"/></p> <p>Photos taken <input type="checkbox"/></p> <p>Notes <input type="checkbox"/></p>
	<p>9. Is every hole or opening in every floor, wall, partition, ceiling, roof, and in every ancillary fitting thereto of every bedroom securely covered with vermin-proof material?</p> <p>Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution)</p> <p>Alternative Solution or Action to rectify:</p>	<p>A8(b)</p>	<p>Complies <input type="checkbox"/></p> <p>Does not comply <input type="checkbox"/></p> <p>Photos taken <input type="checkbox"/></p> <p>Notes <input type="checkbox"/></p>

Performance Criteria Each habitable room must have adequate ventilation to prevent the creation of unhealthy conditions.		P9	
<p>Habitable room is a room able to be lived in (e.g. Bedroom, living room etc.). The use of mechanical ventilation in sanitary facilities that do not have an outside wall and hence does not have a window/skylight may be acceptable.</p> <p>Permanent openings– (a) Windows; or (b) Doors; or (c) Ventilated skylights.</p> <p>Window includes a roof light, glass panel, glass block or brick, glass louver, glass sash, glazed door, or other device which transmits natural light directly from outside a building to the room concerned when in the closed position.</p>	<p>10. Is each habitable room naturally ventilated by a permanent opening that opens to:</p> <p><input type="checkbox"/> a suitably sized court yard; or</p> <p><input type="checkbox"/> the sky; or</p> <p><input type="checkbox"/> an open verandah, carport, or the like?</p> <p>Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution) Alternative Solution or Action to rectify:</p>	A9(c)	<p>Complies <input type="checkbox"/></p> <p>Does not comply <input type="checkbox"/></p> <p>Photos taken <input type="checkbox"/></p> <p>Notes <input type="checkbox"/></p>
	<p>11. Is each habitable room naturally ventilated by a permanent opening with an opening or openable size not less than 5% of the floor area of the room required to be ventilated?</p> <p>Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution) Alternative Solution or Action to rectify:</p>	A9(a)	

Section 2 – Sanitary facilities

Performance Criteria Suitable sanitary facilities for personal hygiene must be provided for the residents.		P7	OFFICE USE ONLY - DCO							
<p>Definition / Hint</p> <p>Sanitary facilities means- toilets, basins, showers, kitchen sinks, laundry tubs, and the like.</p> <p>Provide details of the number of baths or showers in the table provided. Also indicate the number for each gender. If there is insufficient space, provide details as an attachment.</p> <p>Closet pan means a toilet.</p> <p>Male facilities may provide one closet pan for each 12 males if one urinal is provided for each</p>	<p>12. Are private facilities provided for each resident?</p> <p>Yes <input type="checkbox"/> (No need to answer Questions 13 – 18; go to Question 19)</p> <p>No <input type="checkbox"/> (Proceed to next)</p>		<p>Complies <input type="checkbox"/></p> <p>Does not comply <input type="checkbox"/></p> <p>Photos taken <input type="checkbox"/></p> <p>Notes <input type="checkbox"/></p>							
	<p>13. Is a bath or shower provided for each 10 residents or part thereof?</p> <table border="1" style="width: 100%;"> <tr> <td># Male Baths</td> <td></td> </tr> <tr> <td># Female Baths</td> <td></td> </tr> <tr> <td># Male Showers</td> <td></td> </tr> <tr> <td># Female Showers</td> <td></td> </tr> </table> <p>Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution)</p>	# Male Baths		# Female Baths		# Male Showers		# Female Showers		A7(a)(i)
# Male Baths										
# Female Baths										
# Male Showers										
# Female Showers										

<p>25 (up to 50 and one additional urinal is provided for each additional 50 males or part thereof e.g. 72 Males would be provided with 3 urinals and 6 closet pans).</p> <p>Cold only water needs to be provided to water closets and urinals. If all other sanitary facilities are provided with hot and cold water then answer yes to this question.</p> <p>It is strongly recommended that sanitary napkin disposal units be provided if the residential service provides accommodation for women and shared sanitary facilities are provided.</p>	<p>Alternative Solution or Action to rectify:</p>		<input type="checkbox"/> Notes <input type="checkbox"/>						
	<p>14. Male Facilities – Is there:</p> <p><input type="checkbox"/> one closet pan per 12 male residents or part thereof;</p> <p><input type="checkbox"/> one urinal per 25 male residents or part thereof (up to 50);</p> <p><input type="checkbox"/> plus one urinal per additional 50 male residents or part thereof; and</p> <p><input type="checkbox"/> one washbasin per 10 male residents or part thereof?</p> <p>15. Is there at least one closet pan screened from adjacent compartments with a door and partitions extending from the floor to at least 1.8m above the floor?</p> <table border="1"> <tr> <td># Male Urinals</td> <td></td> </tr> <tr> <td># Male Closet Pans</td> <td></td> </tr> <tr> <td># Male Hand Basins</td> <td></td> </tr> </table> <p>Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution)</p> <p>Alternative Solution or Action to rectify:</p>	# Male Urinals		# Male Closet Pans		# Male Hand Basins		A7(a)(ii)	Complies <input type="checkbox"/> Does not comply <input type="checkbox"/> Photos taken <input type="checkbox"/> Notes <input type="checkbox"/>
	# Male Urinals								
	# Male Closet Pans								
	# Male Hand Basins								
	<p>16. Female facilities – Is there one closet pan and one washbasin per 10 female residents or part thereof?</p> <table border="1"> <tr> <td># Female Closet Pans</td> <td></td> </tr> <tr> <td># Female Hand Basins</td> <td></td> </tr> </table> <p>Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution)</p> <p>Alternative Solution or Action to rectify:</p>	# Female Closet Pans		# Female Hand Basins		A7(a)(ii)	Complies <input type="checkbox"/> Does not comply <input type="checkbox"/> Photos taken <input type="checkbox"/> Notes <input type="checkbox"/>		
	# Female Closet Pans								
	# Female Hand Basins								
<p>17. Is hot and cold water provided to all sanitary facilities?</p> <p>Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution)</p> <p>Alternative Solution or Action to rectify:</p>	A7(b)	Complies <input type="checkbox"/> Does not comply <input type="checkbox"/> Photos taken <input type="checkbox"/> Notes <input type="checkbox"/>							
<p>18. If women are provided with a receptacle for the disposal of sanitary napkins does the receptacle:</p> <p><input type="checkbox"/> have rigid walls;</p> <p><input type="checkbox"/> ensure waste does not spill from it during usual usage and servicing;</p> <p><input type="checkbox"/> withstand heat, humidity and sunlight; and</p> <p><input type="checkbox"/> have inner surfaces designed to allow easy removal of waste that are smooth, free of recesses and able to be readily cleaned.</p> <p>Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution)</p> <p>Alternative Solution or Action to rectify:</p>	A7(c)	Complies <input type="checkbox"/> Does not comply <input type="checkbox"/> Photos taken <input type="checkbox"/> Notes <input type="checkbox"/>							

Vermin means rats, mice, guinea pigs and other rodents capable of carrying disease and that is not protected.	19. Is every floor, wall, partition, ceiling, roof, and every ancillary fitting thereto of every bathroom constructed and maintained to prevent the undetected entry of vermin? <i>and</i> 20. Is every hole or opening in every floor, wall, partition, ceiling, roof, and in every ancillary fitting thereto of every bathroom securely covered with vermin-proof material? Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution) Alternative Solution or Action to rectify:	A8(a)-(b)	Complies <input type="checkbox"/> Does not comply <input type="checkbox"/> Photos taken <input type="checkbox"/> Notes <input type="checkbox"/>

Section 3 – Early warning system

Performance Criteria Building occupants must be provided with appropriate automatic warning on the detection of smoke so that they may evacuate in the event of a fire to a place of safety, having regard to – <ul style="list-style-type: none"> the height of the building; and the construction of the building; and the mobility and other characteristics of the occupants; and the power supply available to the building. <p>In premises intended to accommodate more than 6 people, the building/s must comply with the requirements of MP2.1 Fire Safety in Budget Accommodation Buildings under the Building Act 1975. Please contact Queensland Fire and Emergency Services for confirmation of compliance if a building fire safety inspection has not been undertaken within the last six months.</p>		P10	OFFICE USE ONLY - DCO
Definition / Hint Provide documentation that the smoke alarms comply with the standard and are regularly maintained in a working order. This may be achieved by written advice from a certified electrician of recent testing (within last 6 months).	21. In premises intended to accommodate less than 6 people, are smoke alarms installed on or near the ceiling in the following locations? <input type="checkbox"/> (a) every bedroom; and <input type="checkbox"/> (b) in every enclosed or internal corridor, hallway associated with a bedroom or common areas, at a maximum of 5m centres; or <input type="checkbox"/> (c) if there is no enclosed or internal corridor or hallway, in an area between the bedrooms and the remainder of the building; and <input type="checkbox"/> (d) on each storey? <i>Provide details of the location of the smoke alarms on a floor plan.</i> Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution) Alternative Solution or Action to rectify:	A10 (a)-(d)	Complies <input type="checkbox"/> Does not comply <input type="checkbox"/> Photos taken <input type="checkbox"/> Notes <input type="checkbox"/>
	22. Do all the smoke alarms comply with AS3786 – 1993 and are powered by – <input type="checkbox"/> a consumer mains power supply, where available; or <input type="checkbox"/> a tamper-proof lithium battery where consumer powers supply is not available? Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution)	A10 (e)-(f)	Complies <input type="checkbox"/> Does not comply <input type="checkbox"/> Photos taken <input type="checkbox"/> Notes <input type="checkbox"/>

Section 4 – Emergency lighting

Performance Criteria A system of lighting for safe evacuation in the event of a fire must be provided, to the degree necessary, appropriate to – <ul style="list-style-type: none"> • the function or use of the building; and • the floor area of the building; and • the distance of travel to an exit; and • the characteristics of the occupants. 		P11	OFFICE USE ONLY - DCO
Definition / Hint Provide documentation that functional lighting is in working order. This may be achieved by written advice from a certified electrician of recent testing (within last 6 months). Travel Distance means the distance between a bedroom or any part of the premises to open space. Exit means any, or any combination of the following if they provide egress to a road or open space: (i) An internal or external stairway. (ii) A ramp. (iii) A fire-isolated Passageway. (iv) A doorway opening to a Road or open space. Open Space means a space on the allotment, or a roof or similar part of a building adequately protected from fire, open to the sky and connected directly with a public road.	23. In premises intended to accommodate four or five people, is a system of lighting installed which consists of: <ul style="list-style-type: none"> <input type="checkbox"/> a light incorporated within and activated by the smoke alarm required by Question 21(b) and (c); or <input type="checkbox"/> the existing lighting located within the areas nominated in Question 21(b) and (c) above, activated by the smoke alarms in these areas? Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution) Alternative Solution or Action to rectify: In premises intended to accommodate more than 6 people, the building/s must comply with the requirements of MP2.1 - Fire Safety in Budget Accommodation Buildings under the Building Act 1975. Please contact Queensland Fire and Emergency Services for confirmation of compliance if a building fire safety inspection has not been undertaken within the last six months.	A11	Complies <input type="checkbox"/> Does not comply <input type="checkbox"/> Photos taken <input type="checkbox"/> Notes <input type="checkbox"/>

Section 5 – Emergency telephone access

Performance Criteria Suitable provision must be provided for residents to ring emergency services in the event of an emergency.		P12	OFFICE USE ONLY - DCO
Definition / Hint Provision of a pay phone may be acceptable as long as the phone is in working order. Provide location of phone on the floor plan.	24. Is a landline telephone provided that is easily accessible by residents? Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution) Alternative Solution or Action to rectify:	A12	Complies <input type="checkbox"/> Does not comply <input type="checkbox"/> Photos taken <input type="checkbox"/> Notes <input type="checkbox"/>

Section 6: Ventilation and vermin control (all areas other than bedrooms)

Bedrooms are covered by Questions 8 – 10 in Section 1 of this Compliance Checklist

Performance Criteria		P9 and P8	OFFICE USE ONLY - DCO
<p>Each habitable room must have adequate ventilation to prevent the creation of unhealthy conditions.</p> <p>The undetected entry of vermin into the building must be prevented to minimise the risk of spread of disease.</p>			
<p>Definition / Hint</p> <p>Habitable room is a room able to be lived in (e.g. Bedroom, living room etc.). The use of mechanical ventilation in sanitary facilities that do not have an outside wall and hence does not have a window/skylight may be acceptable.</p> <p>Permanent openings are: (a) Windows; or (b) Doors; or (c) Ventilated skylights</p> <p>Window includes a roof light, glass panel, glass block or brick, glass louver, glass sash, glazed door, or other device which transmits natural light directly from outside a building to the room concerned when in the closed position.</p> <p>Vermin means rats, mice, guinea pigs and other rodents capable of carrying disease and that is not protected.</p>	<p>25. Is each habitable room naturally ventilated by a permanent opening that opens to:</p> <p><input type="checkbox"/> a suitably sized court yard; or</p> <p><input type="checkbox"/> the sky; or</p> <p><input type="checkbox"/> an open verandah, carport, or the like?</p> <p>Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution)</p> <p>Alternative Solution or Action to rectify:</p>	A9(c)	<p>Complies <input type="checkbox"/></p> <p>Does not comply <input type="checkbox"/></p> <p>Photos taken <input type="checkbox"/></p> <p>Notes <input type="checkbox"/></p>
	<p>26. Is each habitable room naturally ventilated by a permanent opening with an opening or openable size not less than 5% of the floor area of the room required to be ventilated?</p> <p>Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution)</p> <p>Alternative Solution or Action to rectify:</p>	A9(a)	
	<p>27. Is every floor, wall, partition, ceiling, roof and every ancillary fitting thereto of every residential service building or other structure constructed and maintained to prevent the undetected entry of vermin?</p> <p>Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution)</p> <p>Alternative Solution or Action to rectify:</p>	A8(a)	<p>Complies <input type="checkbox"/></p> <p>Does not comply <input type="checkbox"/></p> <p>Photos taken <input type="checkbox"/></p> <p>Notes <input type="checkbox"/></p>
	<p>28. Is every hole or opening in every floor, wall, partition, ceiling, roof, and in every ancillary fitting thereto of every residential service premises or other structure securely covered with vermin-proof material?</p> <p>Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution)</p> <p>Alternative Solution or Action to rectify:</p>	A8(b)	<p>Complies <input type="checkbox"/></p> <p>Does not comply <input type="checkbox"/></p> <p>Photos taken <input type="checkbox"/></p> <p>Notes <input type="checkbox"/></p>

Section 7 – Kitchen facilities

<p>Performance Criteria A kitchen must have: (a) adequate food preparation areas; and (b) suitable capacity to cater for the number of residents expected to prepare meals; and (c) unencumbered area and safe access to the kitchen at all times; and (d) fixtures and finishes which maintain the safety and wholesomeness of food; and (e) suitable cooking appliances and refrigerator space sufficient for the number of meals being prepared; and (f) suitable cleaning-up facilities for washing and cleaning of utensils; and (g) adequate storage facilities to prevent contamination of food and utensils.</p>	<p>P1</p>	<p>OFFICE USE ONLY - EHO</p>
---	-----------	---

Definitions:

Kitchen means where meals are prepared for or by residents.

Unencumbered area means a clear circulation space with no fixtures or fittings intruding within the space. Loose furniture (e.g. Fridge) can be included in the unencumbered areas.

Resident means a person who in the course of the service, occupies 1 or more rooms as the person's only or main residence; and is not the service provider or a relative of the service provider; or a person employed in the service by the service provider.

<p>Do residents prepare their own meals? Yes <input type="checkbox"/> (Proceed to Question 29 below) No <input type="checkbox"/> (Proceed to Question 38 below)</p>	<p>OFFICE USE ONLY - EHO</p>
--	--

<p>Dining room means where meals are eaten at a table or a designated area used for dining.</p> <p>Floor Area means area measured within the walls of a room or space.</p> <p>A dining room should be distinct from lounge facilities. They do not have to be in separate rooms and does not preclude the use of open plan areas with lounge and dining facilities at opposite ends.</p> <p>Impervious means not able to be penetrated by liquids. Reticulated water is water supplied and treated by Council.</p> <p>If the stove is not a four-burner stove it may be acceptable if the stove facilities are equivalent to the number of burners required (eg. 1-15 residents require 4 burners).</p> <p>Providing a microwave may be acceptable as a substitute for an</p>	<p>29. Is the kitchen separate to the dining room? If YES: <input type="checkbox"/> Do the kitchen facilities have a minimum floor area of 0.65m² per person? If NO: <input type="checkbox"/> Do the combined dining room/kitchen facilities have a floor area of at least 16m²? <input type="checkbox"/> Does the combined dining room/kitchen facilities have a floor area of 1m² per person provided for the residents? Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution) Alternative Solution or Action to rectify:</p>	<p>A1(a)(i)</p>	<p>Complies <input type="checkbox"/> Does not comply <input type="checkbox"/> Photos taken <input type="checkbox"/> Notes <input type="checkbox"/></p>
	<p>30. Is the floor covering durable, impervious, finished to a smooth even surface free from cracks and crevices? Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution) Alternative Solution or Action to rectify:</p>	<p>A1(a)(ii)</p>	<p>Complies <input type="checkbox"/> Does not comply <input type="checkbox"/> Photos taken <input type="checkbox"/> Notes <input type="checkbox"/></p>
	<p>31. Are the walls and ceiling durable, finished in a light coloured impervious material that is smooth and free from cracks and crevices? Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution) Alternative Solution or Action to rectify:</p>	<p>A1(a)(iii)</p>	<p>Complies <input type="checkbox"/> Does not comply <input type="checkbox"/></p>

<p>over/burner.</p> <p>Volume can be determined by reading the manufacturers compliance plate or measuring the dimensions of the fridge.</p>			<p>Photos taken <input type="checkbox"/></p> <p>Notes <input type="checkbox"/></p>																		
<p>Providing fridges in each resident's room rather than in the kitchen may be acceptable.</p> <p>Volume of freezer can be determined by measuring the dimensions of the freezer or by reading the manufacturers compliance plate.</p>	<p>32. Are the walls behind the cooking appliances ceramic tiles or lined with a smooth impervious material?</p> <p>Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution)</p> <p>Alternative Solution or Action to rectify:</p>	<p>A1(a)(iv)</p>	<p>Complies <input type="checkbox"/></p> <p>Does not comply <input type="checkbox"/></p> <p>Photos taken <input type="checkbox"/></p> <p>Notes <input type="checkbox"/></p>																		
<p>The food storage facilities need to be separate from the storage provided for cleaning equipment and cleaning chemicals.</p> <p>Please include details of food storage facilities and cupboard space in the floor plan.</p>	<p>33. Are there sink facilities with a drainer and reticulated hot and cold water?</p> <p>Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution)</p> <p>Alternative Solution or Action to rectify:</p>	<p>A1(a)(vii)</p>	<p>Complies <input type="checkbox"/></p> <p>Does not comply <input type="checkbox"/></p> <p>Photos taken <input type="checkbox"/></p> <p>Notes <input type="checkbox"/></p>																		
	<p>34. Does the premises have electric or gas stoves in accordance with the table below?</p> <table border="1" data-bbox="456 1037 1133 1234"> <thead> <tr> <th># of Residents</th> <th>Ovens</th> <th>4 Burner Stoves</th> </tr> </thead> <tbody> <tr> <td>1-15</td> <td>1</td> <td>1</td> </tr> <tr> <td>16-30</td> <td>1</td> <td>2</td> </tr> <tr> <td>31-45</td> <td>2</td> <td>3</td> </tr> <tr> <td>46-60</td> <td>2</td> <td>4</td> </tr> <tr> <td>Over 60</td> <td>2</td> <td>> 4 with 1 for each additional 15 residents (or part thereof)</td> </tr> </tbody> </table> <p>Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution)</p> <p>Alternative Solution or Action to rectify:</p>	# of Residents	Ovens	4 Burner Stoves	1-15	1	1	16-30	1	2	31-45	2	3	46-60	2	4	Over 60	2	> 4 with 1 for each additional 15 residents (or part thereof)	<p>A1(a)(viii)</p>	<p>Complies <input type="checkbox"/></p> <p>Does not comply <input type="checkbox"/></p> <p>Photos taken <input type="checkbox"/></p> <p>Notes <input type="checkbox"/></p>
# of Residents	Ovens	4 Burner Stoves																			
1-15	1	1																			
16-30	1	2																			
31-45	2	3																			
46-60	2	4																			
Over 60	2	> 4 with 1 for each additional 15 residents (or part thereof)																			
	<p>35. Is a volume of 50L of fridge space provided for each resident?</p> <table border="1" data-bbox="488 1472 1133 1541"> <tr> <td>Volume of Fridge Space (total)</td> <td></td> </tr> <tr> <td># of Residents</td> <td></td> </tr> </table> <p>Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution)</p> <p>Alternative Solution or Action to rectify:</p>	Volume of Fridge Space (total)		# of Residents		<p>A1(a)(vi)(A)</p>	<p>Complies <input type="checkbox"/></p> <p>Does not comply <input type="checkbox"/></p> <p>Photos taken <input type="checkbox"/></p> <p>Notes <input type="checkbox"/></p>														
Volume of Fridge Space (total)																					
# of Residents																					
	<p>36. Is a volume of 5L of freezer space provided for each resident?</p> <table border="1" data-bbox="488 1808 1133 1877"> <tr> <td>Volume of Freezer Space (total)</td> <td></td> </tr> <tr> <td># of Residents</td> <td></td> </tr> </table> <p>Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution)</p> <p>Alternative Solution or Action to rectify:</p>	Volume of Freezer Space (total)		# of Residents		<p>A1(a)(vi)(B)</p>	<p>Complies <input type="checkbox"/></p> <p>Does not comply <input type="checkbox"/></p>														
Volume of Freezer Space (total)																					
# of Residents																					

			Photos taken <input type="checkbox"/> Notes <input type="checkbox"/>
	37. Do the kitchen facilities have food storage facilities and cupboard space of 0.06m³ per resident adequate to prevent contamination of food and cooking and eating utensils by dirt, dust, flies etc.? Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution) Alternative Solution or Action to rectify:	A1(a)(v)	Complies <input type="checkbox"/> Does not comply <input type="checkbox"/> Photos taken <input type="checkbox"/> Notes <input type="checkbox"/>

Is a food service is provided? Yes <input type="checkbox"/> (Proceed to Question 38 below) No <input type="checkbox"/> (Ensure you have answered Questions 28 – 37 and proceed to Question 40)	OFFICE USE ONLY - EHO
---	---------------------------------

Definition / Hint Food service means a service of regularly providing meals to a resident. The licence number referred to is not your Certificate of registration for the business. It is the licence issued under the <i>Food Act 2006</i> to you by the Council. A copy of the licence is to be on the premises at all times and be available to an authorised officer upon request. A copy of the Food Safety Standards can be obtained from the Food Standards Australia New Zealand web site: http://www.foodstandards.gov.au	38. Do the premises have a current Food Licence? Yes <input type="checkbox"/> (Provide licence number below and Proceed to next) Licence no. <input type="text"/> No <input type="checkbox"/> (Proceed to next) Alternative Solution or Action to rectify:		Complies <input type="checkbox"/> Does not comply <input type="checkbox"/> Photos taken <input type="checkbox"/> Notes <input type="checkbox"/>
	39. Do the premises' kitchen facilities comply with the relevant requirements of Food Standards Australia New Zealand National Food Safety Standards 3.2.2 and 3.2.3? Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution) Alternative Solution or Action to rectify:	A1(b)	Complies <input type="checkbox"/> Does not comply <input type="checkbox"/> Photos taken <input type="checkbox"/> Notes <input type="checkbox"/>

Section 8 – Dining facilities

Performance Criteria Suitable dining room facilities must be provided appropriate to the number of residents dining at any one time and the number of meals expected to be prepared.	P6	OFFICE USE ONLY - EHO
Definition / Hint Dining room means where meals are eaten at a table or designated area used for dining	40. Are meals prepared or provided for residents? Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (go to Section 9)	A6(a) Complies <input type="checkbox"/> Does not comply <input type="checkbox"/>

<p>Provide details of all seating within the dining area in the table provided. If there is insufficient space, please provide details as an attachment.</p> <p>If the tables are not rectangular please provide details and measurements as an attachment.</p> <p>A dining room should be distinct from lounge facilities. They do not have to be in separate rooms and does not preclude the use of open plan areas with lounge and dining facilities at opposite ends.</p>			Photos taken <input type="checkbox"/> Notes <input type="checkbox"/>
	41. Do dining room facilities include tables and seating of at least 600mm of table per resident for 50% of the residents? Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution) Alternative Solution or Action to rectify:	A6(a)(i)	Complies <input type="checkbox"/> Does not comply <input type="checkbox"/> Photos taken <input type="checkbox"/> Notes <input type="checkbox"/>
	42. Is the Dining Room located close to the kitchen facilities and distinct from the lounge facilities? Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution) Alternative Solution or Action to rectify:	A6(a)(ii)	Complies <input type="checkbox"/> Does not comply <input type="checkbox"/> Photos taken <input type="checkbox"/> Notes <input type="checkbox"/>

Section 9 – Storage facilities

Performance Criteria Adequate storage facilities for cleaning chemicals and equipment are located to ensure there are no impediments to safe movement about the premises and that chemicals are stored in a safe manner.		P5	OFFICE USE ONLY - EHO
Definition / Hint Storage facilities -means facilities for the storage of cleaning equipment and cleaning agents each washing machine. If an offsite contractor who provides all the cleaning equipment performs the cleaning then storage for cleaning chemicals and equipment may not be necessary. Details of any such arrangements needs to be documented in the area provided for alternative solutions.	43. Are storage facilities for cleaning equipment provided in the kitchen, laundry or an external storage facility? Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution) Alternative Solution or Action to rectify:	A5	Complies <input type="checkbox"/> Does not comply <input type="checkbox"/> Photos taken <input type="checkbox"/> Notes <input type="checkbox"/>

Section 10 – Laundry facilities

Is all laundry performed off-site by a contractor or the service provider?

Yes (Proceed to **Section 11** of this Compliance Checklist)

No (Proceed to **Question 44** below)

Laundry done on the premises for residents

Performance Criteria		A2	OFFICE USE ONLY - EHO										
Adequate laundry and clothes drying facilities must be provided in a space having a durable and hygienic floor, wall and ceiling finishes that cater for the number of residents.													
Definition / Hint Incidental loads are those loads that are not part of the normal regular laundry service. The capacity can be found either written on the manufacturer's compliance plate or in the operator's manual for the machine. The primary use of such a dryer is to allow the drying of the incidental loads that may occur. Details of the dryer capacity may be found on the manufacturer's compliance plate or in the operator's manual. Please provide details of the type of floor covering as an attachment. Please note that unsealed concrete is not an impervious material. Brick walls that are not painted or sealed do not provide a smooth even surface free from cracks and crevices.	44. Do the laundry facilities include one five (5) kg capacity automatic washing machine to handle incidental loads? Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution) Alternative Solution or Action to rectify:	A2(i)(A)	Complies <input type="checkbox"/> Does not comply <input type="checkbox"/> Photos taken <input type="checkbox"/> Notes <input type="checkbox"/>										
	45. Do the laundry facilities have one ten (10) kg capacity automatic washing machine for each 20 residents or part thereof? <table border="1" style="margin-left: auto; margin-right: auto;"> <thead> <tr> <th># of machines</th> <th>Capacity</th> </tr> </thead> <tbody> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </tbody> </table> Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution) Alternative Solution or Action to rectify:	# of machines	Capacity									A2(a)(i)(A)	Complies <input type="checkbox"/> Does not comply <input type="checkbox"/> Photos taken <input type="checkbox"/> Notes <input type="checkbox"/>
	# of machines	Capacity											
46. Do the laundry facilities include one domestic dryer to match the five (5) kg capacity automatic washing machine? Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution) Alternative Solution or Action to rectify:	A2(a)(i)(B)	Complies <input type="checkbox"/> Does not comply <input type="checkbox"/> Photos taken <input type="checkbox"/> Notes <input type="checkbox"/>											

	<p>47. Do the laundry facilities have one ten (10) kg capacity dryer for each of the ten (10) kg capacity automatic washing machine?</p> <p>Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution)</p> <p>Alternative Solution or Action to rectify:</p>	<p>A2(a)(i) (B)</p>	<p>Complies <input type="checkbox"/></p> <p>Does not comply <input type="checkbox"/></p> <p>Photos taken <input type="checkbox"/></p> <p>Notes <input type="checkbox"/></p>
	<p>48. Are the laundry facilities provided with a large tub?</p> <p>Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution)</p> <p>Alternative Solution or Action to rectify:</p>	<p>A2(a)(i) (c)</p>	<p>Complies <input type="checkbox"/></p> <p>Does not comply <input type="checkbox"/></p> <p>Photos taken <input type="checkbox"/></p> <p>Notes <input type="checkbox"/></p>
	<p>49. Is the floor of the laundry facilities covered with a durable, impervious material finished to a smooth even surface free from cracks and crevices?</p> <p>Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution)</p> <p>Alternative Solution or Action to rectify:</p>	<p>A2(a)(ii) (A)</p>	<p>Complies <input type="checkbox"/></p> <p>Does not comply <input type="checkbox"/></p> <p>Photos taken <input type="checkbox"/></p> <p>Notes <input type="checkbox"/></p>
	<p>50. Are the walls and ceilings of the laundry facilities finished with a smooth even surface free from cracks and crevices?</p> <p>Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution)</p> <p>Alternative Solution or Action to rectify:</p>	<p>A2(a)(ii) (B)</p>	<p>Complies <input type="checkbox"/></p> <p>Does not comply <input type="checkbox"/></p> <p>Photos taken <input type="checkbox"/></p> <p>Notes <input type="checkbox"/></p>

Laundry done by residents (complete if residents perform any of their own)

Performance Criteria		P2	OFFICE USE ONLY - EHO					
<p>Adequate laundry and clothes drying facilities must be provided in a space having a durable and hygienic floor, wall and ceiling finishes that cater for the number of residents.</p>								
<p>Definition / Hint</p> <p>Hot and cold water reticulation must be provided to each washing machine.</p> <p>The wash trough needs to be of sufficient size to allow for hand washing of clothes</p> <p>Please provide details of the clothesline facilities in the table provided if there is insufficient space please provide as an attachment.</p>	<p>51. Do the laundry facilities include one seven (7) kg automatic washing machine with hot and cold water reticulation per 15 residents or part there of?</p> <table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td style="padding: 2px;">Total capacity</td> <td style="width: 80px;"></td> </tr> <tr> <td style="padding: 2px;"># of residents</td> <td></td> </tr> </table> <p>Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution) Alternative Solution or Action to rectify:</p>	Total capacity		# of residents		<p>A2(b)(i) and A2(b)(v)</p>	<p>Complies <input type="checkbox"/></p> <p>Does not comply <input type="checkbox"/></p> <p>Photos taken <input type="checkbox"/></p> <p>Notes <input type="checkbox"/></p>	
	Total capacity							
	# of residents							
<p>52. Do the laundry facilities include one wash trough with cold-water reticulation per 15 residents or part thereof?</p> <table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td style="padding: 2px;"># of wash troughs</td> <td style="width: 80px;"></td> </tr> </table> <p>Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution) Alternative Solution or Action to rectify:</p>	# of wash troughs		<p>A2(b)(ii) and A2(b)(iv)</p>	<p>Complies <input type="checkbox"/></p> <p>Does not comply <input type="checkbox"/></p> <p>Photos taken <input type="checkbox"/></p> <p>Notes <input type="checkbox"/></p>				
# of wash troughs								
<p>53. Do the laundry facilities include clothes drying facilities comprising of 7.5m Clothes Line per resident? OR Does the premise have a heat-operated drying cabinet or appliance in the same room as the washing machine?</p> <table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td style="padding: 2px;">Length of Line</td> <td style="width: 80px;"></td> </tr> <tr> <td style="padding: 2px;"># of Strands</td> <td></td> </tr> <tr> <td style="padding: 2px;">Device used (if applicable)</td> <td></td> </tr> </table> <p>Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution) Alternative Solution or Action to rectify:</p>	Length of Line		# of Strands		Device used (if applicable)		<p>A2(b)(iii)</p>	<p>Complies <input type="checkbox"/></p> <p>Does not comply <input type="checkbox"/></p> <p>Photos taken <input type="checkbox"/></p> <p>Notes <input type="checkbox"/></p>
Length of Line								
# of Strands								
Device used (if applicable)								

Section 11: Common areas

Performance Criteria		P3	OFFICE USE ONLY - EHO
Adequate common areas and facilities must be provided for general relaxation and socialisation and may be a mix of indoor and outdoor areas.			
Definition / Hint Common areas means areas such as lounge rooms, recreation rooms, verandas, and covered outdoor relaxation areas The common area space can be made up of a number of common areas.	54. Is a common area provided with a floor area of at least 0.5m² per residents? <i>Please include detail in floor plan and measurements in floor plan.</i> Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution) Alternative Solution or Action to rectify:	A3(a)	Complies <input type="checkbox"/> Does not comply <input type="checkbox"/> Photos taken <input type="checkbox"/> Notes <input type="checkbox"/>
	55. Are external common areas roofed or covered? Yes <input type="checkbox"/> No <input type="checkbox"/> (provide details or alternative solution) Alternative Solution or Action to rectify:	A3(b)	

OFFICE USE ONLY - Officer details

Development Compliance Officer details

Officer name			
Location			
Phone extension		Alternative phone	
Email			
Signature		Date	

Development Compliance use only

Date of building inspection		
	<input type="checkbox"/> Compliance	<input type="checkbox"/> Non-compliance with building requirements
Date building compliance notice issued		