



Office Use Only	Application Number
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# Appointment of Principal Certifying Authority

## LEGISLATION

In accordance with Section 109E of the *Environmental Planning and Assessment Act 1979*, the person having the benefit of a development consent or complying development certificate for development is to appoint a principal certifying authority in respect of building work involved in the development and a principal certifying authority in respect of subdivision work involved in the development.

### FURTHER INFORMATION

Moree Plains Shire Council  
 Level 2, 30 Heber Street  
 PO Box 420  
 MOREE NSW 2400  
 Tel: 02 6757 3222  
 Fax: 02 6752 3934  
 council@mpsc.nsw.gov.au

### Subject Land

Street Address \_\_\_\_\_  
 Lot, Sec and DP \_\_\_\_\_

### Application No.

DA Number \_\_\_\_\_ CC Number \_\_\_\_\_  
 CDC Number \_\_\_\_\_

### PCA Conditions

This appointment is subject to the applicant complying with the following conditions:

1. Comply with all conditions of Development Consent / Complying Development Certificate.
2. Carry out the development in accordance with approved plans and specifications.
3. Allow Accredited Officers and Staff access to the construction site at any time for Regulatory functions.
4. Provide a minimum of 48 hours notice prior to booking inspections between 9.00am – 5.00pm week days.
5. Not to proceed until each critical stage inspection has been passed.
6. Not allow occupation of a building until an Occupation Certificate (or Interim Occupation Certificate) is issued for the development.
7. Agree to pay for inspections in excess of those estimated at the time of lodgement of fees.
8. Only One Principal Certifying Authority can be appointed for all of the work relating to the Development Consent or Complying Development Certificate.
9. Only One Occupation Certificate can be issued per development consent or per Complying Development Certificate.

### Signature

I/We \_\_\_\_\_ appoint  
 \_\_\_\_\_ as the Principal Certifying Authority  
 and agree to abide by the foregoing conditions.

Signature	Name (please print)	Date
_____	_____	_____

**NOTE:** This appointment can only be made by person having benefit of the Consent (Owner/Leasee)