

Certificate of compliance with inspections, maintenance & reporting procedures

Form 12A (Section 108 (3) (c) Building Act 2004)

Building

Street address of building		
Building name	Compliance schedule no	
Level/unit no	Annual BWOF expiry date	
Legal description of land where building is located		
Location of building within site/block no		

Owner

Name of person	
Contact person	
Mailing address	
Street address/registered office	

Compliance

The inspection, maintenance & reporting procedures of the compliance schedule have been fully complied with during the 12 months prior to the date stated below, in relation to the following specified item(s)

Name of licensed building practitioner (please print)		
Name of LBP/IQP company	LBP/IQP no	
Signature of licensed building practitioner	Date	



System

1 Automatic system for fire suppression 2 Automatic or manual emergency warning systems 3 Electromagnetic or automatic doors or windows 3/1 Automatic doors 3/2 Access controlled doors 3/3 Interfaced fire or smoke doors or windows 4 Emergency lighting systems 5 Escape route pressuitation systems 6 Riser mains 7 Automatic back-flow preventers 8 Lifts, escalators, travelators or similar systems for moving people or goods within buildings 8/1 Passenger carrying lifts 8/2 Service lift 8/3 Escalators and moving walks 9 Mechanical ventilation or air conditioning systems 11 Audio loops or other assistive listening systems 12/2 Audio loops or other assistive listening systems 13/3 Smoke control 13/3 Smoke control 13/4 Ichery power systems and infrared beam transmission systems in any of specified systems 13/2 FM radio frequency systems for or signs relating to, a specified system in any of specified systems 13/3 Smoke control 13/3 </th <th>,</th> <th></th>	,	
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