

CERTIFICATE OF THE RESPONSIBLE DESIGNER (PLUMBING WORK)

Section
80(1)(b)

Form

35B

To: Owner name
 Address
 Suburb/postcode

Designer details:

Name: Category:
 Business name: Phone No:
 Business address:
 Fax No:
 Accreditation or Licence No: Email address:

Details of the proposed work:

Owner/Applicant Designer's project reference No.
 Address: Lot No:

 Type of work: *(e.g. new installation/ alteration/ addition/ repair/ other)*

Description of the Design Work (Scope, limitations or exclusions):

Deemed-to-Satisfy: <input type="checkbox"/>	Alternative Solution: <input type="checkbox"/> (tick <input checked="" type="checkbox"/> the appropriate box)

Design documents provided:

The following documents are provided with this Certificate –

Document description:

Drawing numbers:	Prepared by:	Date:
Schedules:	Prepared by:	Date:
Specifications:	Prepared by:	Date:
Computations:	Prepared by:	Date:
Alternative solution proposals:	Prepared by:	Date:
Test reports:	Prepared by:	Date:

