



NATIONAL CAPITAL DISTRICT BUILDING AUTHORITY

APPLICATION FOR COMPLETION CERTIFICATE

(Including **Permissive Occupancy**)

Note: This is the appropriate form to be used for Class II - IX Building Occupancy only

Date:/...../2016

To: Chairman
NCD Building Authority
PO Box 7270
BOROKO
NCD

SUBJECT:

Project Description:

Building Permit No:..... Date Building Permit Approval: Date:...../...../20.....

Building Classification: Construction Type:

Project Location: Portion:.....Section:.....Lot:.....Street:.....

Area:.....

Name of Builder / Address:.....

.....

Contact: Tel:..... Cell Ph.:..... Email:.....

The above project is now considered completed to a state where occupancy may be effected.

The following building has been inspected to conform to all approved drawings issued under this Building Permit. Relevant approvals were also obtained from respective authorized technical personnel / professionals confirming compliance with necessary code requirements. These include the following;

A: INSTALLERS LICENSE & CERTIFICATION

- 1.0 Electrical Wiring Installation / Checked by:.....
 - o License No:..... Date of Expiry:..... (Attach copy of license)
- 2.0 Sanitary Plumbing / Gas Installation / Checked by:.....
 - o License No:..... Date of Expiry:..... (Attach copy of license)
- 3.0 Sewer Connection / Checked by:
 - o License No:..... Date of Expiry:..... (Attach copy of license)
- 4.0 Fire Detection systems / Checked by:
 - o License No:..... Date of Expiry:..... (Attach copy of license)

B: COMPLIANCE CERTIFICATION – SECTION 12 OF NCDBA LETTER OF APPROVAL

- 1.0 Compliance Certification from PNG Power Limited: Attached / Not Attached
 - o Inspected by: Contact:
- 2.0 Compliance Certification from PNG Fire Department Attached / Not Attached
 - o Inspected by: Contact:
- 3.0 Compliance Certificate / Report from Registered Structural Engineer: Attached / Not Attached
 - o Inspected by: Contact:
- 4.0 **Equipment Commissioning Certificate from Consulting Engineers;**
 - o Air Condition Installation: (Applicable / Not Applicable)
 - Name of Consultant:
 - Commission Certificate / Report attached: Yes / No
 - o Mechanical Lifts: (Applicable / Not Applicable)
 - Name of Consultant:
 - Commission Certificate / Report attached: Yes / No
 - o Escalators Installation: (Applicable / Not Applicable)
 - Name of Consultant:
 - Commission Certificate / Report attached: Yes / No
 - o (Applicable / Not Applicable)
 - Name of Consultant:
 - Commission certificate attached: Yes / No
 - o (Applicable / Not Applicable)
 - Name of Consultant:
 - Commission certificate attached: Yes / No

Declaration by Applicant

I, have secured all relevant requirements as listed above and hereby submit my application with relevant attachments for your consideration and approval of the relevant Permission Occupancy Certificate.

Furthermore, my application is *ready / not ready* to be considered for the issue of a Permissive occupancy or Completion Certificate.

| | | |
|--------------------------|-------------|-------------|
| | | |
| Name of Applicant | Sign | Date |

NOTE:

- 1) *After completing all above requirements with relevant attachments, the applicant should sign this application and submit to the NCD Building Authority for further required FINAL INSPECTION.*
- 2) *Final Plumbing / Services Inspection and Final Building Inspection will be organized and carried out by the NCDBA only after the Applicant has submitted this properly completed and signed application form.*