|  |
| --- |
| Mark N/A to any part that does not apply |
| Property/project details |
| Building permit number |  | Project reference  |  |
| Location code |  | LTO number |  | **Lot number** |  |
| Address |  |
| Description of works - provide full details of works certified under this certificate |
|  |
| Drawing numbers |  |
| Inspection records |  |
| Installer’s details |
| Provide the details of the installers of the hydraulic systems |
|  |
| **Comments and exclusions**  |
|  |
| Certification by hydraulic engineer |
| I certify that reasonable care has been taken to ensure that the hydraulic services described above have been constructed in accordance with the approved plans and building permit. |
| Signature |  | Date |  |
| Name / nominee**[[1]](#footnote-1)** |  | Individual NT BPB registration number |  |
| Registered company name (if certification is on behalf of a company) |  |
| Company NT BPB registration number |  |
| Schedule of inspections completed |
| Indicate which of the below has been completed. Attach inspection records to this certificate.  |
| Placement of below ground services prior to backfill. | Yes / No |
| Pipe pressure tests. | Yes / No |
| Drainage installations prior to concealment. | Yes / No |
| Other inspections | Yes / No |
| Detail of other inspections |  |
| Further informationContact Building Advisory Services on 08 8999 8985 or email bas@nt.gov.au  |

1. Name and registration number of nominee signing on behalf of the company or if no registered company, the name of registered individual issuing certification. [↑](#footnote-ref-1)