

Application for Building Compliance Notice Kitchen and Common Area only

Residential Services (Accreditation) Act 2002 Section 29

Application form for a building compliance notice, issued by the Local Government, stating that the premises comply with the prescribed building requirements for a residential service.

Please use **BLOCK LETTERS** and complete all details in full

Privacy Statement

Your information is handled in accordance with the **Information Privacy Act (Qld) 2009** and may only be accessed by Councillors, Council employees and authorised contractors. Unless authorised or required by law, we will not provide your personal information to any other person or agency.

Council may also use your personal information in order to contact you to provide you with information regarding Council functions and services. If you do not wish to receive such information please opt out using the unsubscribe link in the communication material sent to you.

Building Compliance Inspection Process

Gaining or renewing accreditation as a residential services building includes demonstrating that the premises in which the residential service is offered complies with the mandatory building requirements in MP 5.7 - Residential Services Building Standard of the Queensland Development Code and new buildings meet the requirements of the Building Code of Australia.

1. Applicant (service provider) details

Applicant type	<input type="checkbox"/> Individual applicant	<input type="checkbox"/> Corporate applicant
Applicant name		
ACN (if corporate applicant)		
Contact person name (if corporate applicant)		
Residential address / registered office address		
Postal address		
All correspondence will be mailed to this address		
Primary phone	Alternative phone	
Email		

2. Business details

• Complete this section if the applicant is trading as a business.

Business name		
ABN		
Is the business name to be used in correspondence?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Primary phone	Alternative phone	
Email		

3. Fees

Fee name - Refer to Council's Fees and Charge and [√] please tick applicable fee(s)	Amount
<input type="checkbox"/> Up to 20 persons	\$
<input type="checkbox"/> More than 20 persons	\$

These fees are in accordance with the Council's regulatory fees and non-regulatory charges.

Payment options

- Business partner account (BP) – please complete details below
- Cash, cheque or credit card at any of the Council branch offices. For branch office locations and operating hours, please refer to the Council's website
- Cheque or money order by post to Scenic Rim Regional Council, PO Box 25, Beaudesert Qld 4285. Please ensure that you provide adequate reference details or attachments to allow the cheque to be appropriately receipted.

Please be advised that payment by credit card will incur a surcharge.

Business partner name		Business partner number	
-----------------------	--	-------------------------	--

4. Property details

Lot number		Registered plan type and number	
Property address			
Building name (if applicable)			

5. Residential service details

When was the building constructed?

--

If unsure, which of the following best describes the age of the building? Tick applicable box.

<input type="checkbox"/> Pre 1976	<input type="checkbox"/> 1976-1992	<input type="checkbox"/> Post 1992
-----------------------------------	------------------------------------	------------------------------------

Gross floor area	m ²	Number of storeys	
Maximum number of persons who can be accommodated		Are residents provided with meals?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Please note that buildings where six or more residents reside will also require submission of a fire safety certificate from QFES ^{2}			

Will the service provider or associate¹ be present during the building inspection?

<input type="checkbox"/> Service provider	<input type="checkbox"/> Associate	<input type="checkbox"/> Neither
---	------------------------------------	----------------------------------

Name of person to be present		Contact phone number	
------------------------------	--	----------------------	--

Reference

¹ A person is an associate of a service provider if the person takes part in the management of a residential service for the service provider. This includes an executive officer of a corporation who takes part in the management of a residential service for the corporation.

² Queensland Fire and Emergency Services

6. Occupier's consent

- Completion of this section is required only if the applicant is not the occupier of the premises
- Completion of this section provides the occupier's permission for City officers to enter the property to undertake the building inspection.

Name (in full)			
Contact details (optional)			
Signature/s:		Date:	

7. Checklist – Residential Services (Accreditation) application in the form approved

<p>The application form must be fully completed. The <i>Residential Services (Accreditation) Act 2002</i> section 29(2)(a) requires that the application must be in the form approved by the local government. An application will only be considered as having been received in the form approved by Council if all completed Items 1 – 5 are provided.</p> <p>Sample plans are included on the last page as a guide to the type of drawing standard and details required.</p>	Office Use Only
<input type="checkbox"/> 1. Provide a copy of a certificate of classification to occupy the building	<input type="checkbox"/>
<input type="checkbox"/> 2. Provide a floor plan/s showing the following detail: Size of rooms Location of rooms Location and size of kitchen facilities Location and size of dining facilities Location of common areas both indoor and outdoor Location of emergency phone Location of smoke alarm/s	<input type="checkbox"/>
<input type="checkbox"/> 3. Provide written advice from a certified electrician of recent testing (within last 6 months) of early warning systems and emergency lighting [Note: This is necessary for the City to assess compliance with MP5.7 P10 (Early Warning System) and P11 (Emergency Lighting)].	<input type="checkbox"/>
<input type="checkbox"/> 4. Provide the completed and signed Compliance Checklist	<input type="checkbox"/> All sections completed and form signed
<input type="checkbox"/> 5. Pay the relevant fee	<input type="checkbox"/>

8. Declaration

I declare that:

- The information provided in this form is complete and correct.
- I have read the privacy notice.
I acknowledge that in the event the premises are not compliant at the time of inspection that **a reinspection fee will be charged** for a subsequent inspection.
- All required information in Section 7 Checklist – Residential Services (Accreditation) application in the form approved has been provided.

I acknowledge that if the requirements in Items 1 – 5 are not fully completed, an Incomplete Application Notice may be issued by the Council and the application will not be considered as having been received in the form approved by the local government and cannot be progressed until the notice is complied with. The decision period will not begin until the required information is submitted.

SIGNATURE:		DATE:	
-------------------	--	--------------	--

Lodging your Application

Applications can be lodged at one of Customer Service Centres where various payment options are available. If you are lodging by mail, a cheque for the correct amount must be attached and made payable to Scenic Rim Regional Council.

Notes

If Items 1 – 5 are not fully completed, you will receive an Incomplete Application Notice. The application will not be considered to have been received in the form approved by the local government until any outstanding information identified in the Incomplete Application Notice is provided. The decision period will not start until all information required by this approved form is received by the Scenic Rim Regional Council.

You should receive a Building Compliance Notice within 20 business days after the local government receives the application in the form approved (“the decision period”). If you do not receive a notice within the decision period you may appeal to a

development tribunal established under the *Planning Act 2016*. The appeal must be made within 20 business days after the last day of the decision period.

For more information on appeals contact the Registrar of the development tribunals on 07 3237 0403.

Office use only			
Date received		Fee amount paid	
Received by		Receipt number	
Business partner name		Account number	
Business partner number		System code	<i>(if applicable)</i>
All documents in Checklist provided		All sections of compliance checklist completed	

Compliance Checklist – to be completed by Applicant

Section 7 – Kitchen facilities

<p>Performance Criteria A kitchen must have:</p> <ul style="list-style-type: none"> (a) adequate food preparation areas; and (b) suitable capacity to cater for the number of residents expected to prepare meals; and (c) unencumbered area and safe access to the kitchen at all times; and (d) fixtures and finishes which maintain the safety and wholesomeness of food; and (e) suitable cooking appliances and refrigerator space sufficient for the number of meals being prepared; and (f) suitable cleaning-up facilities for washing and cleaning of utensils; and (g) adequate storage facilities to prevent contamination of food and utensils. 	P1	Office Use Only - EHO
---	-----------	------------------------------

Definitions:

Kitchen means where meals are prepared for or by residents.

Unencumbered area means a clear circulation space with no fixtures or fittings intruding within the space. Loose furniture (e.g. Fridge) can be included in the unencumbered areas.

Resident means a person who in the course of the service, occupies 1 or more rooms as the person's only or main residence; and is not the service provider or a relative of the service provider; or a person employed in the service by the service provider.

<p>Do residents prepare their own meals? Yes <input type="checkbox"/> (Proceed to Question 29 below) No <input type="checkbox"/> (Proceed to Question 38 below)</p>	Office Use Only - EHO
--	------------------------------

<p>Dining room means where meals are eaten at a table or a designated area used for dining.</p> <p>Floor Area means area measured within the walls of a room or space.</p> <p>A dining room should be distinct from lounge facilities. They do not have to be in separate rooms and does not preclude the use of open plan areas with lounge and dining facilities at opposite ends.</p>	<p>29. Is the kitchen separate to the dining room?</p> <p>If YES:</p> <p><input type="checkbox"/> Do the kitchen facilities have a minimum floor area of 0.65m² per person?</p> <p>If NO:</p> <p><input type="checkbox"/> Do the combined dining room/kitchen facilities have a floor area of at least 16m²?</p> <p><input type="checkbox"/> Does the combined dining room/kitchen facilities have a floor area of 1m² per person provided for the residents?</p> <p>Yes <input type="checkbox"/> (proceed to next) No <input type="checkbox"/> (provide details or alternative solution) Alternative Solution or Action to rectify:</p>	A1(a)(i)	<p>Complies <input type="checkbox"/></p> <p>Does not comply <input type="checkbox"/></p> <p>Photos taken <input type="checkbox"/></p> <p>Notes <input type="checkbox"/></p>
--	--	-----------------	---

<p>Impervious means not able to be penetrated by liquids. Reticulated water is water supplied and treated by Council.</p> <p>If the stove is not a four-burner stove it may be acceptable if the stove facilities are equivalent to the number of burners required (e.g. 1-15 residents require 4 burners).</p> <p>Providing a microwave may be acceptable as a substitute for an oven/burner.</p> <p>Volume can be determined by reading the manufacturers compliance plate or measuring the dimensions of the fridge.</p> <p>Providing fridges in each resident's room rather than in the kitchen may be acceptable.</p> <p>Volume of freezer can be determined by measuring the dimensions of the freezer or by reading the manufacturers compliance plate.</p> <p>The food storage facilities need to be separate from the storage provided for cleaning equipment and cleaning chemicals.</p> <p>Please include details of food storage facilities and cupboard space in the floor plan.</p>	<p>30. Is the floor covering durable, impervious, finished to a smooth even surface free from cracks and crevices?</p> <p>Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution)</p> <p>Alternative Solution or Action to rectify:</p>	A1(a)(ii)	<p>Complies <input type="checkbox"/></p> <p>Does not comply <input type="checkbox"/></p> <p>Photos taken <input type="checkbox"/></p> <p>Notes <input type="checkbox"/></p>
	<p>31. Are the walls and ceiling durable, finished in a light-coloured impervious material that is smooth and free from cracks and crevices?</p> <p>Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution)</p> <p>Alternative Solution or Action to rectify:</p>	A1(a)(iii)	<p>Complies <input type="checkbox"/></p> <p>Does not comply <input type="checkbox"/></p> <p>Photos taken <input type="checkbox"/></p> <p>Notes <input type="checkbox"/></p>
	<p>32. Are the walls behind the cooking appliances ceramic tiles or lined with a smooth impervious material?</p> <p>Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution)</p> <p>Alternative Solution or Action to rectify:</p>	A1(a)(iv)	<p>Complies <input type="checkbox"/></p> <p>Does not comply <input type="checkbox"/></p> <p>Photos taken <input type="checkbox"/></p> <p>Notes <input type="checkbox"/></p>
	<p>33. Are there sink facilities with a drainer and reticulated hot and cold water?</p> <p>Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution)</p> <p>Alternative Solution or Action to rectify:</p>	A1(a)(vii)	<p>Complies <input type="checkbox"/></p> <p>Does not comply <input type="checkbox"/></p> <p>Photos taken <input type="checkbox"/></p> <p>Notes <input type="checkbox"/></p>

	<p>34. Does the premises have electric or gas stoves in accordance with the table below?</p> <table border="1" data-bbox="443 504 1173 721"> <thead> <tr> <th># of Residents</th> <th>Ovens</th> <th>4 Burner Stoves</th> </tr> </thead> <tbody> <tr> <td>1-15</td> <td>1</td> <td>1</td> </tr> <tr> <td>16-30</td> <td>1</td> <td>2</td> </tr> <tr> <td>31-45</td> <td>2</td> <td>3</td> </tr> <tr> <td>46-60</td> <td>2</td> <td>4</td> </tr> <tr> <td>Over 60</td> <td>2</td> <td>>4 with 1 for each additional 15 residents (or part thereof)</td> </tr> </tbody> </table> <p>Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution) Alternative Solution or Action to rectify:</p>	# of Residents	Ovens	4 Burner Stoves	1-15	1	1	16-30	1	2	31-45	2	3	46-60	2	4	Over 60	2	>4 with 1 for each additional 15 residents (or part thereof)	A1(a) (viii)	<p>Complies <input type="checkbox"/></p> <p>Does not comply <input type="checkbox"/></p> <p>Photos taken <input type="checkbox"/></p> <p>Notes <input type="checkbox"/></p>
# of Residents	Ovens	4 Burner Stoves																			
1-15	1	1																			
16-30	1	2																			
31-45	2	3																			
46-60	2	4																			
Over 60	2	>4 with 1 for each additional 15 residents (or part thereof)																			
	<p>35. Is a volume of 50L of fridge space provided for each resident?</p> <table border="1" data-bbox="443 1014 1129 1088"> <tbody> <tr> <td>Volume of Fridge Space (total)</td> <td></td> </tr> <tr> <td># of Residents</td> <td></td> </tr> </tbody> </table> <p>Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution) Alternative Solution or Action to rectify:</p>	Volume of Fridge Space (total)		# of Residents		A1(a)(vi) (A)	<p>Complies <input type="checkbox"/></p> <p>Does not comply <input type="checkbox"/></p> <p>Photos taken <input type="checkbox"/></p> <p>Notes <input type="checkbox"/></p>														
Volume of Fridge Space (total)																					
# of Residents																					
	<p>36. Is a volume of 5L of freezer space provided for each resident?</p> <table border="1" data-bbox="443 1379 1129 1453"> <tbody> <tr> <td>Volume of Freezer Space (total)</td> <td></td> </tr> <tr> <td># of Residents</td> <td></td> </tr> </tbody> </table> <p>Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution) Alternative Solution or Action to rectify:</p>	Volume of Freezer Space (total)		# of Residents		A1(a)(vi) (B)	<p>Complies <input type="checkbox"/></p> <p>Does not comply <input type="checkbox"/></p> <p>Photos taken <input type="checkbox"/></p> <p>Notes <input type="checkbox"/></p>														
Volume of Freezer Space (total)																					
# of Residents																					
	<p>37. Do the kitchen facilities have food storage facilities and cupboard space of 0.06m³ per resident adequate to prevent contamination of food and cooking and eating utensils by dirt, dust, flies etc.?</p> <p>Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution) Alternative Solution or Action to rectify:</p>	A1(a)(v)	<p>Complies <input type="checkbox"/></p> <p>Does not comply <input type="checkbox"/></p> <p>Photos taken <input type="checkbox"/></p> <p>Notes <input type="checkbox"/></p>																		

Is a food service is provided? Yes <input type="checkbox"/> (Proceed to Question 38 below) No <input type="checkbox"/> (Ensure you have answered Questions 28 – 37 and proceed to Question 40)	Office Use Only - EHO
---	----------------------------------

Definition / Hint Food service means a service of regularly providing meals to a resident. The licence number referred to is not your Certificate of registration for the business. It is the licence issued under the <i>Food Act 2006</i> to you by the Council. A copy of the licence is to be on the premises at all times and be available to an authorised officer upon request. A copy of the Food Safety Standards can be obtained from the Food Standards Australia New Zealand web site: http://www.foodstandards.gov.au	38. Do the premises have a current Food Licence? Yes <input type="checkbox"/> (Provide licence number below and Proceed to next)		Complies <input type="checkbox"/> Does not comply <input type="checkbox"/> Photos taken <input type="checkbox"/> Notes <input type="checkbox"/>
	Licence no: <input style="width: 100px;" type="text"/> No <input type="checkbox"/> (Proceed to next) Alternative Solution or Action to rectify:		
	39. Do the premises' kitchen facilities comply with the relevant requirements of Food Standards Australia New Zealand National Food Safety Standards 3.2.2 and 3.2.3? Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution) Alternative Solution or Action to rectify:	A1(b)	Complies <input type="checkbox"/> Does not comply <input type="checkbox"/> Photos taken <input type="checkbox"/> Notes <input type="checkbox"/>

Section 8 –Dining facilities

Performance Criteria Suitable dining room facilities must be provided appropriate to the number of residents dining at any one time and the number of meals expected to be prepared.	P6	Office Use Only - EHO
---	-----------	----------------------------------

Definition / Hint Dining room means where meals are eaten at a table or designated area used for dining. Provide details of all seating within the dining area in the table provided. If there is insufficient space, please provide details as an attached. If the tables are not rectangular please provide details and measurements as an attachment.	40. Are meals prepared or provided for residents? Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (go to Section 9)		Complies <input type="checkbox"/> Does not comply <input type="checkbox"/> Photos taken <input type="checkbox"/> Notes <input type="checkbox"/>
	41. Do dining room facilities include tables and seating of at least 600mm of table per resident for 50% of the residents? Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution) Alternative Solution or Action to rectify:		

A dining room should be distinct from lounge facilities. They do not have to be in separate rooms and does not preclude the use of open plan areas with lounge and dining facilities at opposite ends			<input type="checkbox"/> Photos taken <input type="checkbox"/> Notes <input type="checkbox"/>
	42. Is the Dining Room located close to the kitchen facilities and distinct from the lounge facilities? Yes <input type="checkbox"/> (Proceed to next) No <input type="checkbox"/> (provide details or alternative solution) Alternative Solution or Action to rectify:		<input type="checkbox"/> Complies <input type="checkbox"/> Does not comply <input type="checkbox"/> Photos taken <input type="checkbox"/> Notes <input type="checkbox"/>

OFFICE USE ONLY – Officer details

Development Compliance Officer details			
Officer name:			
Location:			
Phone extension:		Alternative phone:	
Email:			
Signature:		Date:	
Assessing Office use only			
Date of building inspection			
	<input type="checkbox"/> Compliance <input type="checkbox"/> Non-compliance with building requirements		
Date notice issued			