

RENOVATION WORKS APPLICATION FORM
Strata Plan 82287
2-6 Bundarra Ave South Wahroonga NSW

Use this form if you wish to undertake building works or renovations within your apartment. This form is to be used according to the conditions outlined in the Owners Corporation's By-Laws available from the Strata Manager.

Please ensure that you have read and understood the By-Laws before completing this form.

No work may commence until your application is approved by the Strata Committee, or in the case of Major Works affecting common property, an appropriate By-Law has been made and registered.

OWNER'S NAME _____ **UNIT/LOT NUMBER** _____

CONTACT PHONE NUMBERS(S)

EMAIL

BRIEF DESCRIPTION OF PROPOSED WORK

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LOCATION: KITCHEN BATHROOM TOILET HALLWAY
 LIVING AREA BEDROOM OTHER

WORK INVOLVES PAINTING TILING FLOOR SURFACES ELECTRICAL
 CEILING AIR CONDITIONING * FIRE SPRINKLERS
 PLUMBING MASONRY WALL REMOVAL / PENETRATION
 COMMON PROPERTY ALTERATION OTHER.....

PLEASE ATTACH DETAILED DESCRIPTION OF INTENDED WORKS; AND
 EITHER: PLANS BY CONTRACTOR (if available); OR
 ROUGH PLAN / DIAGRAM (provided by owner); AND

 CONTRACTOR DETAILS
 Including Contractor's Name, Licence Number, Insurance details, Quote

I the undersigned hereby warrant that I have read the relevant By-Laws and agree to comply with all of the conditions and limitations imposed thereby.

OWNER'S SIGNATURE: **DATE**

* For Air Conditioning work, please see notes on next page.

ADDITIONAL WARRANTIES (IF APPLICABLE)

STRUCTURAL ALTERATIONS:

If the work applied for entails the removal and/or penetration of masonry within the apartment; I hereby warrant that I accept full responsibility for the upkeep and preservation of the altered masonry.

OWNER'S SIGNATURE: DATE

CEILING OR WALL CAVITY ALTERATIONS:

If the work applied for entails the alteration of one or more ceiling or shared wall cavities in the apartment, I hereby warrant that I accept full responsibility for any loss of acoustic amenity caused by the alteration, and that, after the alteration is complete, I shall pay for acoustic testing and shall pay for repairs if it is found to provide inadequate acoustic protection.

OWNER'S SIGNATURE: DATE

HARDFLOORING IN DESIGNATED AREAS:

If the work applied for entails the installation of hard flooring surfaces other than in a kitchen, bathroom or toilet I hereby warrant that, after the new floor is installed, I shall pay for acoustic testing and if it is found to provide inadequate acoustic protection, I shall alter the hard flooring to meet acceptable standards or I shall remove the hard floor and re-install carpet.

OWNER'S SIGNATURE: DATE

Notes for Air Conditioning – New or Replacement (If Applicable)

Any air conditioning system installed (whether new or a replacement) will no longer be using R22 refrigerant gas but are changing over to R32 refrigerant. Noting that the pipework for all units in Strata Plan 82287 was initially installed for air conditioning systems with R22 refrigerant, this Application Form must include a detailed statement from the Contractor guaranteeing that all components of the new system (including pipework) will be compatible with R32 refrigerant. If existing pipework is to be retained, the statement must specify how this compatibility is to be achieved.

PLEASE EMAIL THIS COMPLETED FORM, ALONG WITH ANY APPLICABLE QUOTES, PLANS OR SPECIFICATIONS TO THE OWNERS' STRATA COMMITTEE FOR APPROVAL - BUNDARRA@NSBM.COM.AU

PLEASE NOTE: NO WORK CAN COMMENCE WITHOUT WRITTEN APPROVAL.

**Strata Committee
SP82287
2-8 Bundarra Ave South
Wahroonga NSW 2076**