

| APPLICANT | Riverina Medical & Dental Aboriginal Corporation Po Box 458 WAGGA WAGGA NSW 2650 | | | | | |
|-----------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|---------------|-------------------|-----|---------------------|
| SUBJECT LAND | ADDRESS: 271 Edward St WAGGA WAGGA NSW 2650 LOT/DP: Lot 1 DP 176158 Part Lot 7 DP 1130187 | | | | | |
| CERTIFICATE NO. | CC20/0102 DATE OF ISSUE: 03/06/2020 | | | | | |
| TYPE OF | [X] Specified building/subdivision work has been completed and complies with the plans and specifications. | | | | | |
| CERTIFICATE | [] | Footing | [X] | Frame | [] | Floor Slab |
| | [] | Wet area flashing | [] | Sub floor frame | [] | Stormwater drainage |
| | [] | Internal drainage | [] | External drainage | [] | Trade Waste |
| | [] | Stackwork | [] | Final plumbing | [] | Pool backwash |
| | [] | Piers | | | | |
| | Other [X] Conditions have been complied with Give details of the specified condition(s) of the development <u>or</u> complying development certificate and detail the matter the condition relates to and the standards/instruments that the matter is required to comply with. | | | | | |
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| | Comments: This report relates to new timber framing to the medical building fronting Docker Street only. To AS 1684.2-2010 and truss manufacturer's tie-down and bracing details. | | | | | |
| DETERMINATION | Wagga Wagga City Council confirms that: | | | | | |
| OF CERTIFICATE | [X] The above described building/subdivision work has been completed and complies with the attached plar and specifications and the above described aspect of development complies with the prescribed requirement referred to above. [X] The above condition(s) have been complied with and works can continue. [] The Compliance Certificate is FAILED for the following reasons: | | | | | |
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| | Inspecti | ion Date: | 14/05/2021 | | | |
| | Name of Council Officer: | | Mason, Andrew | | | |
| | BDC Registration No: 1847 | | | | | |
| | Council User ID: | | MASONANDREWJ | | | |

NOTE: This inspection was completed using an electronic device

This inspection report is not a certificate under Part 4A of the Environmental Planning and Assessment Act 1979.

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