



Certifiers2U Pty. Ltd.
 P.O. Box 7, New Brighton NSW 2483
 02 6680 5424
 office@certifiers2u.com.au
 ABN 50619719747

Certification - Termite Protection

Property Details		
Lot:	Sec:	DP:
Street Address:		
Owner/s:		

DA / CDC No:	Dated:
--------------	--------

This is to certify that the _____ (Building/Part) has been protected against subterranean Termites under AS3660.1- 2014 by way of:

- Physical Barrier, Visual Inspection with:
 - Ant Caps;
 - Stirrups;
 - Exposed Concrete Edge;
 - Other Termite Barrier (Specify:_____).
- Chemical Barrier (please **attach** Treatment Certificate).
- Treatment advice provided:
 - In meter box;
 - Other location (Specify:_____).

Installer's Name:	
Address:	
Email Address:	
Telephone:	NSW Licence No.
Signature	Date