

# APPENDIX 1 - PROFESSIONAL CONSULTANT'S CERTIFICATE

Return to:  
Name of Applicant(s)  
Full address of property

I certify that:

1. I have visited the site at appropriate periods from the commencement of construction to the current stage to check generally:  
(a) progress, and  
(b) conformity with drawings, approved under the building regulations, and  
(c) conformity with drawings/instructions properly issued under the building contract.

2. At the stage of my last inspection on \_\_\_\_\_, the property had reached the stage of \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. So far as could be determined by each periodic visual inspection, the property has been generally constructed:  
(a) to a satisfactory standard, and  
(b) in general compliance with the drawings approved under the building regulations.

4. I was originally retained by \_\_\_\_\_  
\_\_\_\_\_ who is the applicant/builder/developer in this case (delete as appropriate).

5. I am aware this certificate is being relied upon by the first purchaser  
\_\_\_\_\_

\_\_\_\_\_ of the property and also by \_\_\_\_\_ (name of lender) when making a mortgage advance to that purchaser secured on this property.

6. I confirm that I will remain liable for a period of 6 years from the date of this certificate. Such liability shall be to the first purchasers and their lenders and upon each sale of the property the remaining period shall be transferred to the subsequent purchasers and their lenders.

7. I confirm that I have appropriate experience in the design and/or monitoring of the construction or conversion of residential buildings.

\_\_\_\_\_  
Name of Professional Consultant  
\_\_\_\_\_  
Qualifications \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Telephone No. \_\_\_\_\_  
Fax No. \_\_\_\_\_

Professional Indemnity Insurer  
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8. The box below shows the minimum amount of professional indemnity insurance the consultant will keep in force to cover his liabilities under this certificate  for any one claim or series of claims arising out of one event.

Signature -----  
Date-----  
\_\_\_\_\_