

Statutory Declaration by AFASP Sub-Contractor

Issued under Automatic Fire Alarm System Services Agreement (AFA-C-01), clause 15.

Sub-Contractor to Complete				
I, (Insert Full Name of Authorised Person Undersigned – Print)				
Insert Position Held				
do solemnly and sincerely declare and affirm that to the best of my knowledge and belief:				
1	Insert full Sub-Contractor Name or Business Name, and			
	(the 'Sub-Contractor') has been selected as a sub-contractor to:			
	Insert name of Automatic Fire Alarm Service Provider			
for the performance of services as detailed below.				
2	The Sub-Contractor has read and is aware of the relevant contractual terms and conditions of the Agreement between the AFASP and Fire and Rescue NSW, and will be entering into a sub-contract with the AFASP in the near future on terms that will not be inconsistent with that Agreement.			
3	There are no reasons of which I am aware that would prevent the sub-contract from being signed and performed in a manner that would allow the satisfactory and timely performance of the Agreement and the provision of the services described therein.			
and I make this solemn declaration conscientiously believing the same to be true, and by virtue of the provisions of the <i>Oaths Act 1900</i> .				
Declared at:on				
	[place]		[date]	
••••	[signature of declarant]			
in the presence of an authorised witness, who states:				
I,, a				
Certify the following matters concerning the making of this statutory declaration by the person who made it: [*please cross out any text that does not apply]				
1.	*I saw the face of the person OR *I did not see the face of the person because the person was wearing a face covering, but I am satisfied that the person had a special justification for not removing the covering, and			
2.	*I have known the person for at least 12 months <i>OR</i> *I have not known the person for at least 12 months, but I have confirmed the person's identity using an identification document and the document I relied on was			
	[describe identification document relied on]			
	[signature of authorised	witness]	[date]	

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