Bushfire management plan/Statement addressing the Bushfire Protection Criteria coversheet

Site address:		
Site visit: Yes No		
Date of site visit (if applicable): Do	Month	Year
Report author or reviewer:		
WA BPAD accreditation level (ple	ase circle):	
Not accredited Level 1 B.	AL assessor Level 2 practitioner Level 2	vel 3 practitioner
If accredited please provide the t	ollowing.	
BPAD accreditation number:	Accreditation expiry: Month	Year
Bushfire management plan versio	n number:	
Bushfire management plan date:	Day Month	Year
Client/business name:		
		Yes No
Has the BAL been calculated by a (tick no if AS3959 method 1 has b	n method other than method 1 as outlined in AS3959 een used to calculate the BAL)?	,
	on criteria elements been addressed through the use only acceptable solutions have been used to addre nts)?	
Is the proposal any of the following	g (see <u>SPP 3.7 for definitions</u>)?	Yes No
Unavoidable development (in BA		
Strategic planning proposal (inclu	ding rezoning applications)	
High risk land-use		
Vulnerable land-use		
None of the above		
	e above answers in the tables is yes should the deci posal to DFES for comment.	sion maker (e.g. local government
Why has it been given one of the development is for accommodati	above listed classifications (E.g. Considered vulnerabon of the elderly, etc.)?	ole land-use as the
The information provided within th	is bushfire management plan to the best of my know	vledge is true and correct:
Signature of report author		