

**APPLICATION FOR PROJECT INFORMATION MEMORANDUM AND/OR BUILDING CONSENT
SECTION 33 OR SECTION 45 BUILDING ACT 2004**



THE BUILDING

Street Address:

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Legal Description Lot: DP:

Sec: Block:

Survey District:

Building Description:

Location within site / block:

Number of Levels: Level/Unit No:

Floor Area in metres²

Current Use:

Year first constructed (if applicable):

THE OWNER

Full Name:
(DR, Mr, Mrs, Miss, Ms)

Contact Person:

Postal Address:

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Street Address:

.....

Phone: Mobile:

Fax: After Hrs:

Email:

Website:

THE AGENT

Name of Agent
(Only required if application is being made on behalf of the owner)

Contact Person: Relationship to Owner:

Postal Address

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Street Address/Registered Office

Phone: Mobile: Email:

After hours: Fax: Website:

APPLICATION

The following evidence of ownership is attached to this application (*tick applicable boxes*):

- | | |
|---|--|
| <input type="checkbox"/> Copy of Certificate of Title | <input type="checkbox"/> Agreement for Sale and Purchase |
| <input type="checkbox"/> Lease | <input type="checkbox"/> Other Documentation showing Full name of Legal Owners of the Building |

First Point of Contact:	<input type="checkbox"/>	Owner	<input type="checkbox"/>	Agent
Who will be paying for this Application:	<input type="checkbox"/>	Owner	<input type="checkbox"/>	Agent
Postal Address for Correspondence:	<input type="checkbox"/>	Owner	<input type="checkbox"/>	Agent

I request that you issue a:

- Project Information Memorandum Building Consent Both

Signature of owner/agent on behalf of and with the authority of the owner.

.....
Signature **Date**

I/we require that my/our Plans Specifications, be treated as confidential in order to protect the security of the building.

THE PROJECT

Full description of the Building Work

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Will the Building Work result in a change of use of the Building? Yes No
Provide Details of Use Below

Intended Life of the Building if Less Than 50 Years years

List the Building Consents Previously Issued For this Project (if any)

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Estimated value of the Building Work on Which the Building Levy will be calculated (including GST)
 \$ (state estimated value as defined in Section 7 of the Building Act 2004).

PROJECT INFORMATION MEMORANDUM

The project involves:

- Land undergoing subdivision, where title has not yet been issued.
 - Alternations to land contours.
 - New or altered connections to public utilities (water / stormwater / sewer).
 - New or altered locations and/or external dimensions of buildings.
 - Building work over, or adjacent to, any road or public place.
 - Building work over, or adjacent to, any existing drains or sewers, or in close proximity to wells or water mains.
 - New or altered access for vehicles.
 - Disposal of stormwater and wastewater.
 - Other matters known to the applicant that may require authorisation from the Council - please specify
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RESTRICTED BUILDING WORK AND LICENSED BUILDING PRACTITIONERS

Restricted Building Work	Licensed Building Practitioner	License Number
Designer:	Name: Address: Phone:	
Builder:	Name: Address: Phone:	
Plumber/Drainlayer:	Name: Address: Phone:	
Electrician:	Name: Address: Phone:	
Other:	Name: Address: Phone:	

COMPLIANCE WITH NEW ZEALAND BUILDING CODE

Clause

Tick relevant building code clauses

Means of Compliance

(Refer to the relevant compliance document(s) or detail of alternative solution in the plans and specifications. Circle relevant means of compliance. If not applicable, write N/A)

Alternative Solutions

<input type="checkbox"/> B1 Structure	B1/AS2	NZS 4229	NZS 3604	NZS 4203	
<input type="checkbox"/> B2 Durability	B2/AS1	NZS 3604	NZS 3101	NZS 3602	
<input type="checkbox"/> C1 Outbreak of fire	C1/AS1				
<input type="checkbox"/> C2 Means of escape	C2/AS1				
<input type="checkbox"/> C3 Spread of fire	C3/AS1				
<input type="checkbox"/> C4 Structural stability during fire	C4/AS1				
<input type="checkbox"/> D1 Access routes	D1/AS1		NZS 4121		
<input type="checkbox"/> D2 Mechanical installations for access	D2/AS1		NZS 4322	EN/81	
<input type="checkbox"/> E1 Surface water	E1/AS1		AS/NZS 3500.3		
<input type="checkbox"/> E2 External moisture	E2/AS1		Specific Design		
<input type="checkbox"/> E3 Internal moisture	E3/AS1				
<input type="checkbox"/> F1 Hazardous agents on site	F1/AS1				
<input type="checkbox"/> F2 Hazardous building materials	F2/AS1		NZS 4233		
<input type="checkbox"/> F3 Hazardous substances & processes	F3/AS1				
<input type="checkbox"/> F4 Safety from falling	F4/AS1		Fencing of Swimming Pools Act		
<input type="checkbox"/> F5 Construction & demolition hazards	F2/AS1				
<input type="checkbox"/> F6 Lighting for emergency	F6/AS1				
<input type="checkbox"/> F7 Warning systems	F7/AS1	AS/NZS 1668	NZS 4512	NZS 4515	
<input type="checkbox"/> F8 Signs	F8/AS1				
<input type="checkbox"/> G1 Personal hygiene	G1/AS1				
<input type="checkbox"/> G2 Laundering	G2/AS1				
<input type="checkbox"/> G3 Food preparation & prevention of contamination	G3/AS1				
<input type="checkbox"/> G4 Ventilation	G4/AS1	AS 1668.2			
<input type="checkbox"/> G5 Interior environment	G5/AS1				
<input type="checkbox"/> G6 Airborne & impact sound	G6/AS1				
<input type="checkbox"/> G7 Natural light	G7/AS1				
<input type="checkbox"/> G8 Artificial light	G8/AS1		NZS 6703		
<input type="checkbox"/> G9 Electricity	G9/AS1				
<input type="checkbox"/> G10 Piped services	G10/AS1		NZS 5261		
<input type="checkbox"/> G11 Gas as an energy source	G11/AS1				
<input type="checkbox"/> G12 Water supplies	G12/AS1		AS/NZS 3500.2	AS/NZS 3500.5	
<input type="checkbox"/> G13 Foul water	G13/AS1	AS/NZS 3500.2	AS/NZS 1547		
<input type="checkbox"/> G14 Industrial liquid waste	G14/AS1				
<input type="checkbox"/> G15 Solid waste	G15/AS1				
<input type="checkbox"/> H1 Energy efficiency	H1/AS1	NZS 4214	NZS 4218	NZS 4243	

Waiver/Modification to Building Code

State nature of waiver or modification.

COMPLIANCE SCHEDULE - do not fill in this section if the application is for a project information memorandum only

- There are no specified systems in the building - Proceed to the next section.
- The specified systems for the building are indicated below:
 - Automatic systems for fire suppression (for example, sprinkler systems).
 - Automatic or manual emergency warning systems for fire or other dangers (other than a warning system for fire that is entirely within a household unit and serves only that unit).
 - Electromagnetic or automatic doors or windows (for example, ones that close on fire alarm activation).
 - Emergency lighting systems.
 - Escape route pressurisation systems.
 - Riser mains for use by fire services.
 - Automatic back-flow preventers connected to a potable water supply.
 - Lifts, escalators, travelators, or other systems for moving people or goods within buildings.
 - Mechanical ventilation or air conditioning systems.
 - Building maintenance units providing access to exterior and interior walls of buildings.
 - Laboratory fume cupboards.
 - Audio loops or other assistive listening systems.
 - Smoke control systems.
 - Emergency power systems for, or signs relating to, a system or feature specified in any of the above.

Means of Escape

- Fire separations
- Smoke separations
- Final exits
- Systems for communicating spoken information intended to facilitate evacuation.
- Signs for communication information intended to facilitate evacuation.
- The following specified systems are being altered, added to, or removed in the course of the building work.

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INFORMATION TO ACCOMPANY YOUR BUILDING CONSENT APPLICATION

The Building Act 2004 states that every application for a building consent shall be accompanied by such plans, specifications and other information as required to show compliance with the New Zealand Building Code.

To ensure that adequate information is provided with the application, ensure you have completed the “Checklist for Preparing Building Consent Applications”. Make sure all the necessary items are checked off and that the checklist has been signed. Please ensure plans are no larger than A3 size.

NOTE: Information required will vary depending on the size and type of your project.

FOR COUNCIL USE ONLY

Receipt Number Date

Received By

Application Number

Application and Checklist both completed: ☺ Yes *(Only accept application if you can tick the smiley face)*