



Doc Ref	TS-04 TS-08 Application for a Project Information Memorandum and/or Building Consent Application Form 7
Date	May 2009

**APPLICATION FOR
A PROJECT INFORMATION MEMORANDUM AND/OR
BUILDING CONSENT**

Section 33 or Section 45, Building Act 2004:
Send or deliver this application to either:
Waimate District Council, PO Box 122, Waimate
Waimate District Council, Queen St, Waimate.

For enquiries phone (03) 689 8079

OFFICE USE:
Application #

Category 1,2,3,PR

PIM, Planning, Drainage, Roding

APPLICATION

I request that you issue a Project Information Memorandum Building Consent for the building work described in this application

THE BUILDING

Street address of building:	Legal description of land where building is located: (State legal description as at the date of application and if the land is proposed to be subdivided, include details of relevant lot numbers and subdivision consents)
	Valuation Number:
Building name: (If applicable)	Location of building within site: (Include nearest street access)
Number of levels: (Include ground level and any levels below ground)	Level/Unit Number: (If applicable)
Area: (total floor area – indicate area affected by the building work if less than the total area)	Current, lawfully established, use: (include number of occupants per level and per use if more than 1 level)
Year first constructed: (insert year, approximate date is acceptable eg: c1920's or 1960-1970)	

THE OWNER

Name of owner: (include preferred form of title, eg: Mr Miss, Dr, if an individual)

Contact person: (only required if different from the owner)

Mailing address:	Street address/Registered Office:
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Contact details:

Landline: _____ Mobile: _____
Daytime: _____ After hours: _____
Fax Number: _____ Email: _____

Please attach one of the following as evidence of ownership to this application:

Copy of Certificate of title/lease/agreement of sale and purchase/or other document no older than 3 months showing full name of legal owner(s) of the building.

THE AGENT

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

Contact person:

Mailing address:

Street address/Registered Office:

Contact details:

Landline: _____ Mobile: _____

Daytime: _____ After hours: _____

Fax Number: _____ Email: _____

Relationship to Owner: (state details of the authorisation from the owner to make the application on the owners behalf)

FIRST POINT OF CONTACT (If different from the Owner or Agent)

Name of contact:

Mailing address:

Street address/Registered Office:

Contact details:

Landline: _____ Mobile: _____

Daytime: _____ After hours: _____

Fax Number: _____ Email: _____

Signed by the owner OR:

Signature: _____

Name: _____

Date: _____

Signed by the Agent: (on behalf of, or with authority from, the owner)

Signature: _____

Name: _____

Date: _____

THE PROJECT

Description of the building work: (provide sufficient description of building work to enable scope of work to be fully understood)

Will the building work result in a change of use of the building?

Yes No (ie residential, commercial, industrial)

If yes, provide details of the new use: (provide description of new use)

Intended life of the building if less than 50 years:

Years

List building consents previously issued for this project (if any): (list who issued the consent, date of issue and the consent number)

Estimated value of the building work on which the building levy will be calculated (including GST): (state estimated values as defined in section 7 of the Building Act 2004)

\$ _____

Does the building or site have any cultural heritage significance, or is it a marae? (refer to District Plan)

Yes No

PROJECT INFORMATION MEMORANDUM (FOR Project Information Memorandum only – not required for building consent application)

The following matters are involved in the project: (tick boxes applicable)

- Subdivision
- Alterations to land contours
- New or altered connections to public utilities
- New or altered locations and/or external dimensions of buildings
- New or altered access for vehicles
- Building work over or adjacent to any road or public place
- Disposal of stormwater and wastewater
- Building work over any existing drains or sewers or in close proximity to wells or water mains
- Other matters known to the applicant that may require authorisations from the territorial authority

(specify)

BUILDING CONSENT (Delete this section if this is an application for a Project Information Memorandum only)

The following plans and specifications are attached to this application: (tick boxes applicable)

- specifications calculations plans
 producer statement other (please specify) _____

(All plans and specifications must meet the minimum requirements set out in the regulations or required by the building consent authority)

The building work will comply with the building code as follows:

Clause (which of the following clauses will be involved in the proposed work?)	Means of Compliance (refer to the relevant compliance document(s) or detail of alternative solution in the plans and specifications)	Proposed Inspections (state means of inspection. Note PS4s or certification may be required)
<input type="checkbox"/> B1 Structure	<input type="checkbox"/> B1/AS2 <input type="checkbox"/> NZS 3604 <input type="checkbox"/> NZS4203 <input type="checkbox"/> NZS4229 <input type="checkbox"/> Other _____	<input type="checkbox"/> Council <input type="checkbox"/> Engineer <input type="checkbox"/> Other _____
<input type="checkbox"/> B2 Durability	<input type="checkbox"/> B2/AS1 <input type="checkbox"/> NZS 3101 <input type="checkbox"/> NZS3602 <input type="checkbox"/> NZS3604 <input type="checkbox"/> Other _____	<input type="checkbox"/> Council <input type="checkbox"/> Engineer <input type="checkbox"/> Other _____
<input type="checkbox"/> C1-4 Fire	<input type="checkbox"/> C/AS1 <input type="checkbox"/> Other _____	<input type="checkbox"/> Council <input type="checkbox"/> Engineer <input type="checkbox"/> Other _____
<input type="checkbox"/> D1 Access Routes	<input type="checkbox"/> D1/AS1 <input type="checkbox"/> ZS 4121 <input type="checkbox"/> NZS4121 <input type="checkbox"/> Other _____	<input type="checkbox"/> Council <input type="checkbox"/> Engineer <input type="checkbox"/> Other _____
<input type="checkbox"/> E1 Surface water	<input type="checkbox"/> E2/AS1 <input type="checkbox"/> AS/NZ 3500.3 <input type="checkbox"/> Other _____	<input type="checkbox"/> Council <input type="checkbox"/> Engineer <input type="checkbox"/> Other _____
<input type="checkbox"/> E2 External moisture	<input type="checkbox"/> E2/AS1 <input type="checkbox"/> Specific Design & testing	<input type="checkbox"/> Council <input type="checkbox"/> Engineer <input type="checkbox"/> Other _____
<input type="checkbox"/> E3 Internal Moisture	<input type="checkbox"/> E3/AS1 <input type="checkbox"/> Other _____	<input type="checkbox"/> Council <input type="checkbox"/> Engineer <input type="checkbox"/> Other _____
<input type="checkbox"/> F1 Hazardous agents on site	<input type="checkbox"/> F1/AS1 <input type="checkbox"/> Other _____	<input type="checkbox"/> Council <input type="checkbox"/> Engineer <input type="checkbox"/> Other _____
<input type="checkbox"/> F2 Hazardous building materials	<input type="checkbox"/> F2/AS1 <input type="checkbox"/> NZS 4223 <input type="checkbox"/> Other _____	<input type="checkbox"/> Council <input type="checkbox"/> Engineer <input type="checkbox"/> Other _____
<input type="checkbox"/> F3 Hazardous substances etc	<input type="checkbox"/> F3/AS1 <input type="checkbox"/> FSP Act <input type="checkbox"/> Other _____	<input type="checkbox"/> Council <input type="checkbox"/> Engineer <input type="checkbox"/> Other _____
<input type="checkbox"/> F5 Construction & demolition hazards	<input type="checkbox"/> F5/AS1 <input type="checkbox"/> Other _____	<input type="checkbox"/> Council <input type="checkbox"/> Engineer <input type="checkbox"/> Other _____
<input type="checkbox"/> F6 Lighting for emergency	<input type="checkbox"/> F6/AS1 <input type="checkbox"/> Other _____	<input type="checkbox"/> Council <input type="checkbox"/> Engineer <input type="checkbox"/> Other _____
<input type="checkbox"/> F7 Warning systems	<input type="checkbox"/> F7/AS1 <input type="checkbox"/> AS/NZS 1668 <input type="checkbox"/> NZS 4512 <input type="checkbox"/> NZS 4515 <input type="checkbox"/> Other _____	<input type="checkbox"/> Council <input type="checkbox"/> Engineer <input type="checkbox"/> Other _____
<input type="checkbox"/> F8 Signs	<input type="checkbox"/> F8/AS1 <input type="checkbox"/> Other _____	<input type="checkbox"/> Council <input type="checkbox"/> Engineer <input type="checkbox"/> Other _____
<input type="checkbox"/> G1 Personal hygiene	<input type="checkbox"/> G1/AS1 <input type="checkbox"/> Other _____	<input type="checkbox"/> Council <input type="checkbox"/> Engineer <input type="checkbox"/> Other _____
<input type="checkbox"/> G2 Laundering	<input type="checkbox"/> G2/AS1 <input type="checkbox"/> Other _____	<input type="checkbox"/> Council <input type="checkbox"/> Engineer <input type="checkbox"/> Other _____

<input type="checkbox"/> G3 Food preparation and prevention of contamination	<input type="checkbox"/> G3/AS1 <input type="checkbox"/> Other _____	<input type="checkbox"/> Council <input type="checkbox"/> Engineer <input type="checkbox"/> Other _____
<input type="checkbox"/> G4 Ventilation	<input type="checkbox"/> G4/AS1 <input type="checkbox"/> AS1668.2 <input type="checkbox"/> Other _____	<input type="checkbox"/> Council <input type="checkbox"/> Engineer <input type="checkbox"/> Other _____
<input type="checkbox"/> G5 Interior Environment	<input type="checkbox"/> G5/AS1 <input type="checkbox"/> Other _____	<input type="checkbox"/> Council <input type="checkbox"/> Engineer <input type="checkbox"/> Other _____
<input type="checkbox"/> G6 Airborne & impact sound	<input type="checkbox"/> G6/AS1 <input type="checkbox"/> Other _____	<input type="checkbox"/> Council <input type="checkbox"/> Engineer <input type="checkbox"/> Other _____
<input type="checkbox"/> G7 Natural Light	<input type="checkbox"/> G7/AS1 <input type="checkbox"/> Other _____	<input type="checkbox"/> Council <input type="checkbox"/> Engineer <input type="checkbox"/> Other _____
<input type="checkbox"/> G8 Artificial Light	<input type="checkbox"/> G8/AS1 <input type="checkbox"/> NZS6703 <input type="checkbox"/> Other _____	<input type="checkbox"/> Council <input type="checkbox"/> Engineer <input type="checkbox"/> Other _____
<input type="checkbox"/> G9 Electricity	<input type="checkbox"/> G9/AS1 <input type="checkbox"/> Other _____	<input type="checkbox"/> Council <input type="checkbox"/> Engineer <input type="checkbox"/> Other _____
<input type="checkbox"/> G10 Piped services	<input type="checkbox"/> G10/AS1 <input type="checkbox"/> NZS5261 <input type="checkbox"/> Other _____	<input type="checkbox"/> Council <input type="checkbox"/> Engineer <input type="checkbox"/> Other _____
<input type="checkbox"/> G11 Gas as an energy source	<input type="checkbox"/> G11/AS1 <input type="checkbox"/> AS1668.2 <input type="checkbox"/> Other _____	<input type="checkbox"/> Council <input type="checkbox"/> Engineer <input type="checkbox"/> Other _____
<input type="checkbox"/> G12 Water supplies	<input type="checkbox"/> G12/AS1 <input type="checkbox"/> AS/NZS3500.1 <input type="checkbox"/> AS/NZ3500.4 <input type="checkbox"/> Other _____	<input type="checkbox"/> Council <input type="checkbox"/> Engineer <input type="checkbox"/> Other _____
<input type="checkbox"/> G13 Foul water	<input type="checkbox"/> G13/AS1 <input type="checkbox"/> AS/NZS3500.2 <input type="checkbox"/> BS5572 <input type="checkbox"/> Other _____	<input type="checkbox"/> Council <input type="checkbox"/> Engineer <input type="checkbox"/> Other _____
<input type="checkbox"/> G14 Foul water	<input type="checkbox"/> G14/AS1 <input type="checkbox"/> Other _____	<input type="checkbox"/> Council <input type="checkbox"/> Engineer <input type="checkbox"/> Other _____
<input type="checkbox"/> G15 Solid waste	<input type="checkbox"/> G15/AS1 <input type="checkbox"/> Other _____	<input type="checkbox"/> Council <input type="checkbox"/> Engineer <input type="checkbox"/> Other _____
<input type="checkbox"/> H1 Energy efficiency	<input type="checkbox"/> H1/AS1 <input type="checkbox"/> NZS4218 <input type="checkbox"/> NZS4243 <input type="checkbox"/> ALF Design Manual <input type="checkbox"/> NZS4214 <input type="checkbox"/> Other _____	<input type="checkbox"/> Council <input type="checkbox"/> Engineer <input type="checkbox"/> Other _____
Waiver/modification to NZ Building Code required for following parts of code:		

COMPLIANCE SCHEDULE (delete this section if this is an application for a project memorandum only)

The following specified systems are existing, being altered, added to, or removed in the course of the building work:

	Existing	New	Altered	Added	Removed
<input type="checkbox"/> There are no specified systems in the building	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1. Automatic systems for fire suppression (eg: sprinkler systems)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Electromagnetic or automatic doors or windows (eg: ones that close on fire alarm activation)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Automatic or manual emergency warning systems for fire or other dangers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Emergency lighting systems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. Escape route pressurisation systems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Riser mains for Fire Service use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Any automatic back-flow preventers connected to a potable water supply	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. Lifts, escalators, travelators or other systems for moving people or goods within buildings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Mechanical ventilation or air-conditioning systems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10. Building maintenance units for providing access to the exterior and interior walls of buildings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11. Laboratory fume cupboards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12. Audio loops or other assistive listening systems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13. Smoke control systems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14. Emergency power systems for, or signs relating to, a system or feature specified in any of clauses above	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15. Any or all of the following systems and features, so long as they form part of a building's means of escape from fire, and so long as those means also contain any or all of the systems or features specified in clauses 1-6, 9 & 13 above: a) systems for communicating spoken information intended to facilitate evacuation; and b) final exits (as defined by clause A2 of the building code); and c) fire separations (as so defined); and d) signs for communicating information intended to facilitate evacuation; and e) smoke separations (as so defined)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Have you provided the following? (where relevant)

- Site plan
- Cross sections
- Full Floor plan
- Elevations
- Structural details
- 2 copies of plans
- Producer Statement

KEY PERSONNEL		
Provide names, addresses, telephone numbers and relevant registration numbers if possible.		
BUILDER: Address:	Phone: Cell: E-mail:	Fax:
DESIGNER: Address:	Phone: Cell: E-mail:	Fax:
BUILDING CERTIFIER: Address:	Phone: Cell: E-mail:	Fax:
DRAINLAYER: Address:	Phone: Cell: E-mail:	Fax:
PLUMBER: Address:	Phone: Cell: E-mail:	Fax:
GASFITTER: Address:	Phone: Cell: E-mail:	Fax:
ELECTRICIAN: Address:	Phone: Cell: E-mail:	Fax:
OTHER Address:	Phone: Cell: E-mail:	Fax:
ENGINEER: Address:	Phone: Cell: E-mail:	Fax:
<p>Has the engineer provided a Producer Statement Design? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Has the engineer been engaged to carry out site inspections on the job? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>(if yes, these must be specified on the Producer Statement.)</p> <p style="text-align: center;">CONNECTIONS TO PUBLIC ACCESS AND UTILITIES</p> <p style="text-align: center;">APPLICATION FORMS ARE AVAILABLE FROM THE ASSET UNIT, WAIMATE DISTRICT COUNCIL</p> <p>Water Connection – is a water connection involved with this project? <input type="checkbox"/> New Connection <input type="checkbox"/> Relocated Connection <input type="checkbox"/> No (Connection is existing) <input type="checkbox"/> Existing Connection Removed If more than one, how many are required? _____ Preferred location of connection (looking from street). Distance _____m from <input type="checkbox"/> Left Hand/ <input type="checkbox"/> Right Hand boundary Corner Sites: Street on which connection is to be installed: _____</p> <p>Vehicle Crossing: Is a Vehicle Crossing required for this project? <input type="checkbox"/> New Crossing <input type="checkbox"/> Extended Crossing <input type="checkbox"/> No (Crossing is existing) If more than one, how many are required? _____</p> <p>Service Connections: Are new laterals required to the Council's services in the street? <input type="checkbox"/> Stormwater to the kerb <input type="checkbox"/> Sewer or Stormwater to the mains <input type="checkbox"/> No (Services are existing)</p> <p>Roading: <input type="checkbox"/> Underpass <input type="checkbox"/> Road Opening – Permission to dig up/under the road has been granted from: <input type="checkbox"/> New Zealand Transport Agency <input type="checkbox"/> Asset Unit - Roothing</p>		

All the relevant information on this form is required to be provided under the Building Act and Resource Management Act for the Council to process your application. Under these Acts this information has to be made available to members of the public including business organisations. The information contained in this application may be made available to other units of the Council. You have the right to access the personal information held about you by the Council which can be readily retrieved. You can also request that the Council correct any personal information it holds about you.