	Doc Ref	TS-03-TS-04 Application Building Consent Minor Works Application form 5
		Date	July 2009

**WAIMATE DISTRICT COUNCIL
APPLICATION FOR BUILDING CONSENT MINOR WORKS**

Application Number: _____

THE BUILDING

Street Address: _____ _____	Legal Description: Lot: _____ DP: _____ Other: _____ Valuation Number: _____
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THE OWNER (as defined by the Building Act)	AGENT – FIRST POINT OF CONTACT (Must be authorised by the owner to make this application)
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Full Name(s): _____ Contact Person: _____ Street Address/Registered Office: _____ Mailing Address: _____ Phone: Landline: _____ Fax: _____ Mobile: _____ Email: _____	Name: _____ Company: _____ Mailing Address: _____ Street Address/Registered Office: _____ Phone: Landline _____ Mobile _____ Fax: _____ Email: _____ Relationship to owner: _____
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I request that you issue a Project Information Memorandum and Building Consent described in this application

Signed: _____ Signature of : _____ <small>(print name)</small>	Dated: _____ Owner / Agent (on behalf of and with the consent of the owner) <small>(delete one)</small>
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THE PROJECT

DESCRIPTION OF WORK: (Please tick and give details) <input type="checkbox"/> Swimming Pool Fence only <input type="checkbox"/> Alternative Solution – exemption Swimming Pool Fence OR SPA Pools <input type="checkbox"/> Plumbing /Drainage ☉ <input type="checkbox"/> Demolition <input type="checkbox"/> Pole Shed- 5 Bays Maximum <input type="checkbox"/> Non-habitable Accessory Building (except garages) <input type="checkbox"/> Habitable Accessory Building (no plumbing) ☉ <input type="checkbox"/> Habitable Accessory Building (with plumbing) ☉ <input type="checkbox"/> Standard Garage under 25 ² _____sq metres <input type="checkbox"/> Standard Garage over 25 ² _____sq metres Detailed Description: _____ _____	Have you provided the following? <input type="checkbox"/> Site Plan <input type="checkbox"/> Certificate of Title <input type="checkbox"/> Plumbing/Drainage details <input type="checkbox"/> Cross Sections <input type="checkbox"/> Full Floor plan (all floors) <input type="checkbox"/> Elevations <input type="checkbox"/> Location of smoke detectors in house is required with projects marked ☉ <input type="checkbox"/> Two copies of plans
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Intended Life if less than 50 years: _____ years Estimated Value of proposed work (inclusive of GST): \$ _____	Associated Resource/Subdivision Consents Number RMA: _____ FLOOR AREA Total existing floor area: _____ Additional Floor Area: _____
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FOR COUNCIL USE ONLY

Date Received: _____ Receiving Officer's Name: _____ Date Received: _____	Receipt No: _____ Drainage Plan: Yes <input type="checkbox"/> No <input type="checkbox"/>
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Who is involved in this project?

Designer's Name: _____ Phone: _____

Address: _____ Fax: _____

Builder's Name: _____ Phone: _____

Address: _____ Fax: _____

Plumber's Name: _____ Phone: _____

Address: _____ Fax: _____

Drainlayer's Name: _____ Phone: _____

Address: _____ Fax: _____

Engineer's Name: _____ Phone: _____

Address: _____ Fax: _____


Has the engineer provided a Producer Statement - Design? Yes No

Has the engineer been engaged to carry out site inspections on the job? Yes No

(if yes, these must be specified on the Producer Statement.)

Other: _____ Phone: _____

Address: _____ Fax: _____

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Site Plan and Details

Please draw the whole site plan and show all buildings; the pool; immediate pool area; details of the height, construction position of rails, size of openings of all fences and gates; and all doors; windows and gates giving access to the immediate pool area including type, details of hardware.

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"/> E1/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/NZS3500. <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:		

