|  |  |
| --- | --- |
| The Project | |
| Building Consent Number: |  |
| Address: |  |
| Owner’s Name: |  |
| Owner’s Postal Address: |  |
| Owners Email Address: |  |
| Agent’s Name: |  |
| Agent’s Postal Address: |  |
| Agent’s Contact Phone No: |  |
| Agents Email Address: |  |

|  |  |  |
| --- | --- | --- |
| Details of Modification (Owner to Complete) | | |
| Date of Completion of Building Work: |  | |
| Description of the situation: |  | |
| Owner’s Signature: |  | Date: |

|  |  |
| --- | --- |
| Council Use Only | |
| Modification Number: |  |
| Council Officer |  |
| Summary of decision and reason: |  |
| Outcome (tick one) | □ Reasonable to grant modification □ Unreasonable to grant modification |
| Signature: |  |
| Notification: | □ MBIE Notified □ Copy to Register Date: |