Swimming Pool/Safety Barrier

[Form 2] Section 33 or 45 Building Act 2004



BC Application No.:	pplication No.: Building File No.:					
Project Address / Building Location						
Rapid/Street No.: Road/Street:						
Legal Description: Lot No D.P. No Val No of land where building is located [state legal description as at the date of application]						
of land where building is located [state legal description as at the date of application] Blk name & No	ML No					
Details Of Owner	_					
Please delete items not applicable Title: (*) Mr / Mrs / Miss / Ms (other)	Agent Agent contact must be NZ address (if application made on behalf of owner) Title: (*) Mr / Mrs / Miss / Ms (other)					
Surname:	Surname:	,				
First Name(s):	First Name(s):					
Contact Person (If owner not an individual)	Contact Person (If agent not an individual)					
Mailing Address:	Mailing Address:					
Street Address/Registered Office:	Street Address/Registered Office:					
Phone No: (Ah) (Bh)	Phone No: (Ah) Bh)					
Mobile No: Fax :	Mobile No: Fax :					
Email Address:	Email Address					
Website (if applicable):	Website (if applicable):					
THE FOLLOWING EVIDENCE OF OWNERSHIP IS ATTACHED TO THIS APPLICATION: Copy of certificate of title, lease, agreement for sale and purchase, occupation	Relationship To Owner:	on from the owner to make the application on the owner's behalf)				
order, or other document showing full name of legal owner(s) of the land/building.	Owners authorisation to act as Agen	t: [to be signed in lieu of authorisation letter]				
FIRST POINT OF CONTACT OWNER AGENT	or, alternative	•				
For communications with the Council:	I, as owner of the above property, authorise the person(s) above to act as my agent.					
Mail documents to:	Signature: [of building owner(s)] Date:					
Description of Work / Project						
Pool type: Swimming Pool Spa Pool						
Project: Dool and barrier [indicate type]: O Above-ground, O Ir	n-ground OR	Existing pool – barrier only				
Does the project involve land disturbance/alterations to land contours?	No Yes					
[this includes any accessways, building platforms, buried tanks etc	If yes, please provide tota	l volume				
Detailed description of work [if applicable]:						
Detailed description of Work [if applicable]: Provide sufficient description of building work to enable scope of work to be fully understood]						
ESTIMATED VALUE OF BUILDING WORK (GST incl): \$ INTENDED LIFE [of the building if less than 50 years]: (years) [State estimated value as defined in section 7 of the Building Act 2004]						
I request that you issue a BUILDING CONSENT for the building work described in this application						
X Date:		Please complete sec 4 & 5				
SIGNATURE OF OWNER / AGENT ON BEHALF OF AND WITH THE AU	THORITY OF THE OWNER	continued over leaf				

15 Fitzherbert Street, Gisborne 4010 • Phone: (06) 867-2049 • Freephone: 0800 653 800 • Email: buildinginfo@gdc.govt.nz (for any queries) • www.gdc.govt.nz

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Key Personnel						
DESI	GNER/S Name:					
Phon				Fax:	_	
BUIL	.DER/S Name:			Registration No*		
Addr	ess:					
Phon	e:	Mobile:		Fax:		
FEN	CE SUPPLIER Name: _			Registration No*.		
Address:						
Phon	···					
			_	Registration No*		
Addr	ess:					
Phon						
		EG DAINLAYER Name:		Registration No*		
Phon				Fax:		
ELEC	CTRICIAN Name:					
	e:	Mobile:		Fax:		
The Building work will comply with the building code as follows:						
	ses involved in the building			document(s) or detail of alternative s	olution in the plans and	
work B1	Structure	specifications. Tick N/A if not applica		NZS4229 NZS1170	Other:	
B2	Durability	□ N/A □ B2/AS1		NZS3602	Other:	
D1	Access/slip	□ N/A □ D1/AS1			Other:	
F4	Safety from falling	□ N/A □ F4/AS1	<u> </u>		Other:	
F9	Pool barriers/covers	□ N/A □ F9/AS1 □ N/A □ G9/AS1	□ F9/AS2		Other:	
G9	Electricity			☐ AC/N72500 A		
G12 G13	Water supplies Foul water	□ N/A □ G12/AS1 □ N/A □ G13/AS1	☐ AS/NZS3500.1	□ BS5572	Other:	
013	1 our water	U N/A U U U U/AU I			Other.	
	OID DELAYS IN PROCESSING O	OF YOUR APPLICATION HAVE ATTACHED/PROVIDE	ED FOLLOWING INF			
0				ill be added to the total fee payab	ole.	
0						
0	ONE SET OF PLANS that include pool safety barrier detail; location, height, gates, latching etc (1:100 min scale). Alternatively, if the consent application is for a safety barrier for an existing pool, photos clearly showing all details will be sufficient.					
0	SPECIFICATIONS and detail of compliance with Fencing of Swimming Pools Act 1987 or F9 of the NZ building code.					
0	RECEIPT for payment of deposit fee for this application.					
0	O Please check ALL details on this form are filled out and ENSURE YOU HAVE SIGNED at the bottom of page 1.					

PLEASE NOTE:

- The pool safety barrier must be in place as soon as the pool is in the ground. It is important that the pool is not filled (or partly filled) with water until the barrier/fencing has been approved.
- The owner (and tenant) have an obligation to ensure that the pool safety barrier remains compliant at all times. Safety checks and maintenance must be carried out regularly. For further information, please ask our staff for a copy of our pool safety barrier booklet, or download a copy from our web site gdc.govt.nz.