

Building Consent

Form 2, Section 33 or 45 Building Act 2004



BC Application No.:

Building File No.:

Section 1

The Building [Project Location]

[CT no.]

Street address/rapid number of building: [for structures that do not have a street address, state the nearest street intersection and the distance and direction from that intersection]

Legal description of land where building is located: [state legal description as at the date of application and, if subdivision is proposed include details of relevant lot numbers and subdivision consent]

Lot: _____ DP: _____ Sec No: _____

Blk No: _____ Val No: _____

ML No: _____ Blk name & No: _____

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:

Existing floor area: _____

New floor area: _____

Total floor area: _____

Current, lawfully established, use: [include number of occupants per level and per use if more than one level]

Year first constructed: [approximate date is acceptable e.g.: 1920's or 1960-1970]

Section 2

Owner [must be completed for all applications and all details must be the owners]

Name of owner: [include preferred form of title, e.g. Mr, Miss, Dr if an individual and the contact persons name if a company, trust of similar]

Owner's mailing address:

Street address/Registered office:

Owner's contact details:

Landline: _____

Mobile: _____

After hours: _____

Facsimile Number: _____

Email: _____

Website: _____

Evidence of ownership: [please attach one of the following, as appropriate to the circumstances, showing full name of legal owner(s) of the building/land]

Copy of historical certificate of title, no more than one month old

☐ Agreement for sale and purchase AND*

☐ Lease

☐ Other _____

OR * →

☐ *Council to obtain historical certificate of title (cost as per Council fee schedule)

For office use:

Category

☐ Low risk / Fast

Agent [only required if application is being made on behalf of the owner]

Owners authorisation to act as agent: [complete section below, or alternatively: ☐ authorisation letter attached]

I, _____ as owner of the above property, authorise _____
to act as my agent.

Signature: [of building owner(s)] _____

Date: _____

Name of agent: [include the contact persons name if a company, trust of similar]

Agent's mailing address:

Street address/Registered office:

Agent's contact details:

Landline: _____

Mobile: _____

After hours: _____

Facsimile Number: _____

Email: _____

Website: _____

Relationship to owner: [state details and provide written authorisation from the owner to make the application on the owner's behalf]

The Project

Description of the building work: [provide sufficient description of building work to enable scope of work to be fully understood]

Intended use of building [describe use]:

☐ Commercial use

☐ Residential

▪ dwelling, office, games room, sleepout

☐ Domestic casual use (non habitable, not used for sleeping & or living)

▪ lined shed, shed with toilet & shower, workshop/art studio

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

Estimated value of the building work on which the levy will be calculated (including goods and services tax): [state estimated value as defined in section 7 of the Building Act 2004]

\$

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

☐ Yes

☐ No

If yes, provide details of the new use:

Intended life of the building if less than 50 years:

Type of application: I request that you issue a:

☐ Building Consent

☐ PIM (Project Information Memorandum) only

☐ Building Consent and PIM (Project Information Memorandum)

☐ Building Consent Only in accordance with existing PIM (Project Information Memorandum) [please complete details below]

☐ Project Information Memorandum was applied for on ____/____/____ [if applicable] was issued on ____/____/____

Project Information

The following matters are involved in the project
[you must answer yes or no to these questions]:

No Yes

- Land disturbance/alterations to land contours [include accessways, building platforms, buried tanks, pools etc] ☐ No ☐ Yes If yes, please provide total volume _____
- Side cutting of more than 1 metre [this includes any accessways] ☐ No ☐ Yes
- Subdivision ☐ No ☐ Yes
- Disposal of storm water and wastewater ☐ No ☐ Yes
- New or altered access for vehicles ☐ No ☐ Yes
- New or altered connections to public utilities ☐ No ☐ Yes
- New or altered locations and/or external dimensions of buildings ☐ No ☐ Yes
- Building work over or adjacent to any road or public place ☐ No ☐ Yes
- Building work over any existing drains, sewers or in close proximity to wells or water mains ☐ No ☐ Yes

Other matters known to the applicant that may require authorisations from the territorial authority [specify]:

Building Code Compliance [This section must be completed in full by suitably skilled person]

Producer Statements: It is intended that the following Producer Statement(s) will be relied upon to certify or verify compliance of the plans, specifications or completed works with the Building Code. **Note:** Applications including a PS 1 or PS 2 must be supplied with a copy of any design calculations.

☐ PS 1 (Design)

☐ PS 2 (Design Review)

☐ PS 3 (Construction)

☐ PS 4 (Construction Review)

The building work will comply with the building code as follows: [must be completed in full by the designer]

Clause

Identify which clauses will be involved in the building work

Means of compliance

Refer to relevant compliance document(s) or detail of alternative solution in the plans and specifications.
Tick N/A if not applicable. If ☒ Other "please specify."

| | | | | | | | |
|------|-------------------------------------|------------------------------|-------------------------------------|--|--------------------------------------|----------------------------------|---|
| B1 | Structure | <input type="checkbox"/> N/A | <input type="checkbox"/> B1/AS2/AS1 | <input type="checkbox"/> NZS3604 | <input type="checkbox"/> NZS4229 | <input type="checkbox"/> NZS1170 | <input type="checkbox"/> Other: |
| B2 | Durability | <input type="checkbox"/> N/A | <input type="checkbox"/> B2/AS1 | <input type="checkbox"/> NZS3101 | <input type="checkbox"/> NZS3602 | <input type="checkbox"/> NZS3604 | <input type="checkbox"/> Other: |
| C1-6 | Fire | <input type="checkbox"/> N/A | <input type="checkbox"/> C/AS1 | <input type="checkbox"/> C/AS2 | <input type="checkbox"/> C/VM1 | <input type="checkbox"/> C/VM2 | <input type="checkbox"/> Other: |
| D1 | Access routes | <input type="checkbox"/> N/A | <input type="checkbox"/> D1/AS1 | <input type="checkbox"/> NZS4121 | | | <input type="checkbox"/> Other: |
| D2 | Mechanical installations for access | <input type="checkbox"/> N/A | <input type="checkbox"/> D2/AS1 | <input type="checkbox"/> NZS4332 | <input type="checkbox"/> EN81 | <input type="checkbox"/> EN115 | <input type="checkbox"/> Other: |
| E1 | Surface water | <input type="checkbox"/> N/A | <input type="checkbox"/> E1/AS1 | <input type="checkbox"/> AS/NZS3500.3 | | | <input type="checkbox"/> Other: |
| E2 | External moisture | <input type="checkbox"/> N/A | <input type="checkbox"/> E2/AS1 | <input type="checkbox"/> Specific design and testing | | | |
| E3 | Internal moisture | <input type="checkbox"/> N/A | <input type="checkbox"/> E3/AS1 | | | | <input type="checkbox"/> Other: |
| F1 | Hazardous agents on site | <input type="checkbox"/> N/A | <input type="checkbox"/> F1/AS1 | | | | <input type="checkbox"/> Other: |
| F2 | Hazardous building materials | <input type="checkbox"/> N/A | <input type="checkbox"/> F2/AS1 | <input type="checkbox"/> NZS4223 | | | <input type="checkbox"/> Other: |
| F3 | Hazardous substances etc | <input type="checkbox"/> N/A | <input type="checkbox"/> F3/AS1 | | | | <input type="checkbox"/> Other: |
| F4 | Safety from falling | <input type="checkbox"/> N/A | <input type="checkbox"/> F4/AS1 | <input type="checkbox"/> FSP Act | | | <input type="checkbox"/> Other: |
| F5 | Construction & demolition hazards | <input type="checkbox"/> N/A | <input type="checkbox"/> F5/AS1 | | | | <input type="checkbox"/> Other: |
| F6 | Lighting for emergency | <input type="checkbox"/> N/A | <input type="checkbox"/> F6/AS1 | | | | <input type="checkbox"/> Other: |
| F7 | Warning systems | <input type="checkbox"/> N/A | <input type="checkbox"/> F7/AS1 | <input type="checkbox"/> AS/NZS1668 | <input type="checkbox"/> NZS4512 | <input type="checkbox"/> NZS4515 | <input type="checkbox"/> Other: |
| F8 | Signs | <input type="checkbox"/> N/A | <input type="checkbox"/> F8/AS1 | | | | <input type="checkbox"/> Other: |
| G1 | Personal hygiene | <input type="checkbox"/> N/A | <input type="checkbox"/> G1/AS1 | | | | <input type="checkbox"/> Other: |
| G2 | Laundering | <input type="checkbox"/> N/A | <input type="checkbox"/> G2/AS1 | | | | <input type="checkbox"/> Other: |
| G3 | Food preparation etc | <input type="checkbox"/> N/A | <input type="checkbox"/> G3/AS1 | | | | <input type="checkbox"/> Other: |
| G4 | Ventilation | <input type="checkbox"/> N/A | <input type="checkbox"/> G4/AS1 | <input type="checkbox"/> AS1668.2 | | | <input type="checkbox"/> Other: |
| G5 | Interior environment | <input type="checkbox"/> N/A | <input type="checkbox"/> G5/AS1 | | | | <input type="checkbox"/> Other: |
| G6 | Airborne and impact sound | <input type="checkbox"/> N/A | <input type="checkbox"/> G6/AS1 | | | | <input type="checkbox"/> Other: |
| G7 | Natural light | <input type="checkbox"/> N/A | <input type="checkbox"/> G7/AS1 | | | | <input type="checkbox"/> Other: |
| G8 | Artificial light | <input type="checkbox"/> N/A | <input type="checkbox"/> G8/AS1 | <input type="checkbox"/> NZS6703 | | | <input type="checkbox"/> Other: |
| G9 | Electricity | <input type="checkbox"/> N/A | <input type="checkbox"/> G9/AS1 | | | | <input type="checkbox"/> Other: |
| G10 | Piped services | <input type="checkbox"/> N/A | <input type="checkbox"/> G10/AS1 | <input type="checkbox"/> NZS5261 | | | <input type="checkbox"/> Other: |
| G11 | Gas as an energy source | <input type="checkbox"/> N/A | <input type="checkbox"/> G11/AS1 | | | | <input type="checkbox"/> Other: |
| G12 | Water supplies | <input type="checkbox"/> N/A | <input type="checkbox"/> G12/AS1 | <input type="checkbox"/> AS/NZS3500.1 | <input type="checkbox"/> AS/NZ3500.4 | | <input type="checkbox"/> Other: |
| G13 | Foul water | <input type="checkbox"/> N/A | <input type="checkbox"/> G13/AS1 | <input type="checkbox"/> AS/NZS3500.2 | <input type="checkbox"/> BS5572 | | <input type="checkbox"/> Other: |
| G14 | Industrial liquid waste | <input type="checkbox"/> N/A | <input type="checkbox"/> G14/AS1 | | | | <input type="checkbox"/> Other: |
| G15 | Solid waste | <input type="checkbox"/> N/A | <input type="checkbox"/> G15/AS1 | | | | <input type="checkbox"/> Other: |
| H1 | Energy | <input type="checkbox"/> N/A | <input type="checkbox"/> H1/AS1 | <input type="checkbox"/> NZS421 | <input type="checkbox"/> NZS4218 | <input type="checkbox"/> NZS4243 | <input type="checkbox"/> ALF Design <input type="checkbox"/> Other: |

Waiver/modification/alternative solution to NZ Building Code required for following parts of code:

[State nature of waiver or modification of building code required]

Restricted Building Work

Will the building work include any restricted building work?

☐

Yes

☐

No *[enter personnel below]

If Yes, provide the following details of all licensed building practitioners who will be involved in carrying out or supervising the restricted building work:
[if these details are unknown at the time of the application, they must be supplied before the work begins]

| Name | Licensing class | Licensed building practitioner number [or registration number if treated as being licensed under section 291 of the Building Act 2004] |
|-------|-----------------|--|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

Note: continue on another page if necessary

Details for other personnel who will carry out the work [In addition to any listed above]

| | |
|--|---|
| Designer: Business/Name: _____ Address: _____ Landline: _____ Mobile: _____ Fax: _____ Registration: _____ | Builder: Business/Name: _____ Address: _____ Landline: _____ Mobile: _____ Fax: _____ Registration: _____ |
| Cladding Installer: Business/Name: _____ Address: _____ Landline: _____ Mobile: _____ Fax: _____ Registration: _____ | Roofer: Business/Name: _____ Address: _____ Landline: _____ Mobile: _____ Fax: _____ Registration: _____ |
| Electrician: Business/Name: _____ Address: _____ Landline: _____ Mobile: _____ Fax: _____ Registration: _____ | Gasfitter: Business/Name: _____ Address: _____ Landline: _____ Mobile: _____ Fax: _____ Registration: _____ |
| Plumber: Business/Name: _____ Address: _____ Landline: _____ Mobile: _____ Fax: _____ Registration: _____ | Drainlayer: Business/Name: _____ Address: _____ Landline: _____ Mobile: _____ Fax: _____ Registration: _____ |
| Fireplace Installer: Business/Name: _____ Address: _____ Landline: _____ Mobile: _____ Fax: _____ Registration: _____ | Other [specify]:: Business/Name: _____ Address: _____ Landline: _____ Mobile: _____ Fax: _____ Registration: _____ |
| Other [specify]: Business/Name: _____ Address: _____ Landline: _____ Mobile: _____ Fax: _____ Registration: _____ | Other [specify]:: Business/Name: _____ Address: _____ Landline: _____ Mobile: _____ Fax: _____ Registration: _____ |

Compliance Schedule Details (Not required for PIM only applications)

Does the building have any specified systems [Specified Systems are defined in regulations; if you are not sure whether your building has specified systems, talk to the Council or your architect]?

- ☐ No, there are no specified systems in the building [go to section 9]
- ☐ Yes, please complete the following section(s) and **attach a completed T-27.s1 form** (available on request or download from our web site)
- ☐ The specified systems for the building are as follows: [complete column for existing in table below] and if;
 - ☐ Specified systems are being altered, added to, or removed in the course of the building work: [complete column for new/altered in table below]
 - ☐ The building includes a cable car (includes residential dwelling)

...continued: **Compliance Schedule Details** [complete this section only if you answered yes for the previous question]

If there are specified systems, please select which of these are contained in the building:

| Existing | New/Altered | | Existing | New/Altered | |
|--------------------------|--------------------------|--|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | 1 Automatic systems for fire suppression e.g. sprinklers | <input type="checkbox"/> | <input type="checkbox"/> | 12 Audio loops or other assistive listening systems |
| <input type="checkbox"/> | <input type="checkbox"/> | 2 Automatic or manual emergency warning systems for fire or other dangers | <input type="checkbox"/> | <input type="checkbox"/> | 12/1 Audio Loops |
| <input type="checkbox"/> | <input type="checkbox"/> | 3 Electromagnetic or automatic doors or windows (e.g. ones that close on fire alarm activation) | <input type="checkbox"/> | <input type="checkbox"/> | 12/2 FM systems & infrared beam transmission systems |
| <input type="checkbox"/> | <input type="checkbox"/> | 3/1 Automatic doors | <input type="checkbox"/> | <input type="checkbox"/> | 13 Smoke control systems |
| <input type="checkbox"/> | <input type="checkbox"/> | 3/2 Access controlled doors | <input type="checkbox"/> | <input type="checkbox"/> | 13/1 Mechanical smoke control |
| <input type="checkbox"/> | <input type="checkbox"/> | 3/3 Interfaced fire or smoke doors or windows | <input type="checkbox"/> | <input type="checkbox"/> | 13/2 Natural smoke control |
| <input type="checkbox"/> | <input type="checkbox"/> | 4 Emergency lighting systems | <input type="checkbox"/> | <input type="checkbox"/> | 13/3 Smoke curtains |
| <input type="checkbox"/> | <input type="checkbox"/> | 5 Escape route pressurisation systems | <input type="checkbox"/> | <input type="checkbox"/> | 14 Emergency power systems for, or signs relating to a system or feature specified in clauses 1 to 13 |
| <input type="checkbox"/> | <input type="checkbox"/> | 6 Riser mains for use by fire service | <input type="checkbox"/> | <input type="checkbox"/> | 14/1 Emergency power systems relating to system in clauses 1-13 |
| <input type="checkbox"/> | <input type="checkbox"/> | 7 Any automatic backflow preventer connected to a potable water supply | <input type="checkbox"/> | <input type="checkbox"/> | 14/2 Signs relating to a system specified in clauses 1-13 |
| <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"/> | 15 Any of the following systems, that form part of a building's means of escape and so long as those means also contain any or all of the systems or features specified in 1-6, 9 & 13: |
| <input type="checkbox"/> | <input type="checkbox"/> | 8/1 Passenger carrying lifts | <input type="checkbox"/> | <input type="checkbox"/> | 15/1 Systems to communicate spoken info to facilitate evacuation |
| <input type="checkbox"/> | <input type="checkbox"/> | 8/2 Service lifts | <input type="checkbox"/> | <input type="checkbox"/> | 15/2 Final exits |
| <input type="checkbox"/> | <input type="checkbox"/> | 8/3 Escalators & moving walkways | <input type="checkbox"/> | <input type="checkbox"/> | 15/3 Fire separations |
| <input type="checkbox"/> | <input type="checkbox"/> | 9 Mechanical ventilation or air conditioning systems | <input type="checkbox"/> | <input type="checkbox"/> | 15/4 Signs for communicating information to facilitate evacuation |
| <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"/> | 15/5 Smoke separations |
| <input type="checkbox"/> | <input type="checkbox"/> | 11 Laboratory fume cupboards | | | |

Attachments The following plans and specifications are attached to this application:

All plans and specifications must meet the minimum requirements set out in the regulations or required by the building consent authority. Please refer to the schedule included with this form for complete details of plans, specifications and documents which are required to support your application

| | |
|---|---|
| <input type="checkbox"/> Project Information Memorandum | <input type="checkbox"/> Evidence of ownership |
| <input type="checkbox"/> Certificate attached to Project Information Memorandum | <input type="checkbox"/> Plans and Specifications [as listed in the attached checklist] |
| <input type="checkbox"/> Development Contribution Notice | <input type="checkbox"/> Certificate of Design Work |
| <input type="checkbox"/> Completed Application Checklist (attached overleaf) [Please complete the relevant sections listed below for your project type] | |
| <input type="radio"/> Dwelling: | Complete the following sections: 1, 3 – 11, 13 |
| <input type="radio"/> Solid Fuel Heater: | Complete the following sections: 1, 5 & 13 |
| <input type="radio"/> Commercial / Industrial / Multi-unit Residential: | Complete the following sections: 1 – 13 |
| <input type="radio"/> Alterations / additions to Commercial / Industrial: | Complete the following sections: 1 – 13 |
| <input type="radio"/> Auxiliary Building (garage/farm shed) | Complete the following sections: 1, 3 – 11, 13 |
| <input type="radio"/> Dwelling Addition: | Complete the following sections: 1 – 11, 13 |
| <input type="radio"/> Demolition / Relocation | Complete the following sections: 1, 3 - 13 (as applicable) |
| <input type="radio"/> Change of Use: | Complete the following sections: 1, 3, 5, 7 & 10 - 13 |
| <input type="radio"/> PIM only application: | Complete the following sections: 1, 3, 5-6 |

General

Debtor: [the person responsible for the account]

☐ Owner ☐ Agent ☐ Other: Address: _____ Phone: _____

First point of contact: [for communications with Council]

☐ Owner ☐ Agent ☐ Other: Address: _____ Phone: _____

Signed by the owner:

Signature: _____

Name: _____

Date: _____

OR **Signed by the agent:** [on behalf of, and with authority from the owner]

Signature: _____

Name: _____

Date: _____

Privacy Information: The information you have provided on this form is required so that your building consent application can be processed under the Building Act 2004. The Council collates statistics relating to issued building consents and has a statutory obligation to regularly forward these to Statistics NZ. The Council stores the information on a public register which must be supplied (as previously determined by the Ombudsman) to whosoever requests the information. Under the Privacy Act 1993 you have the right to see and correct personal information the Council holds about you.

Application Checklist [complete relevant sections as listed on previous page - section 9, attachments]

| | | | | | | | | | |
|--|-----|----|--------------------------|---|-----------------------|----|-----|--------------------------|-----|
| <input checked="" type="checkbox"/> SECTION 1: GENERAL COMPLETE FOR ALL APPLICATIONS | | | | | | | | | |
| Building consent application form: Completed and <u>signed</u> by the owner or an agent on behalf of and with written authority from the owner. | | | | | | | Yes | No | N/A |
| One copy of all plans. The plans <u>must</u> be: | | | | | | | | | |
| Drawn clearly to scale (ruled, not sketched) | Yes | No | N/A | Clear and concise copies (*not reduced in size) | Yes | No | N/A | | |
| On plain white, preferably A3* paper | Yes | No | N/A | Include the designers name | Yes | No | N/A | | |
| Drawn in ink (not pencil) | Yes | No | N/A | Engineering details must be draughted | Yes | No | N/A | | |
| Locality plan (1:500): Showing physical location of building in relation to street, north point, legal description and significant landmarks. | | | | | | | Yes | No | N/A |
| Inspection & monitoring: Details of proposed inspection regime by design professionals, eg. architects, engineers, surveyors. | | | | | | | Yes | No | N/A |
| Application deposit: Applications <u>will not be accepted without payment</u> of the appropriate fee/deposit (see page 8 for details). | | | | | | | Yes | No | |
| Proof of ownership: Historical certificate of title, no older than 1 month, sale & purchase agreement or copy of relevant portions of lease. If correct certificate of title is not supplied, council will obtain a copy and invoice the cost with your building consent. | | | | | | | Yes | No | N/A |
| Inspection access: Provide any special requirements regarding access to the site. | | | | | | | Yes | No | N/A |
| <input type="checkbox"/> SECTION 2: DEMOLITION / REMOVAL COMPLETE FOR ALL PROJECTS INVOLVING DEMOLITION OF SIGNIFICANT PARTS OF BUILDINGS OR DEMOLITION OR REMOVAL OF WHOLE BUILDINGS | | | | | | | | | |
| Proposed destination for relocated building | | | | | | | Yes | No | N/A |
| Access to & from site (including use of kerb & crossings) | | | | | | | Yes | No | N/A |
| Specify termination of existing Council services (water, sewer, stormwater) | | | | | | | Yes | No | N/A |
| Details about the building: number of storeys, type of materials, photographs of all elevations | | | | | | | Yes | No | N/A |
| You will need to contact the relevant service authorities listed to advise them of the extent of your work: Electricity, gas, drainage, water, transport, telecommunications or other services that may be affected. | | | | | | | | | |
| Transportation of relocated building: You will be required to contact & provide details to Councils roading department. Payment of a street damage deposit may be required. | | | | | | | | | |
| <input type="checkbox"/> SECTION 3: SITE PLAN (1:200) (or 1:500 for rural areas) COMPLETE FOR NEW BUILDINGS, FOR EXISTING BUILDINGS WHERE THE FOOTPRINT OF THE BUILDING WILL CHANGE OR A NEW STOREY IS BEING ADDED | | | | | | | | | |
| Public drainage (easements) | Yes | No | N/A | Distances to boundaries | Yes | No | N/A | | |
| Existing and proposed buildings | Yes | No | N/A | North point | Yes | No | N/A | | |
| Retaining walls | Yes | No | N/A | Site & hardstand drainage | Yes | No | N/A | | |
| Site coverage / building footprint | Yes | No | N/A | Datum, spot heights, ground contours | Yes | No | N/A | | |
| Septic tank & effluent fields | Yes | No | N/A | Water courses | Yes | No | N/A | | |
| Parking & vehicle access, paved areas and driveways | Yes | No | N/A | Service connections | Yes | No | N/A | | |
| Site area and boundary dimensions | Yes | No | N/A | Street name & house number | Yes | No | N/A | | |
| <input type="checkbox"/> SECTION 4: FOUNDATION PLAN (1:100) COMPLETE FOR NEW BUILDINGS, FOR EXISTING BUILDINGS WHERE THE FOOTPRINT OF THE BUILDING WILL CHANGE OR A NEW STOREY IS BEING ADDED | | | | | | | | | |
| Timber Floor | | | <input type="checkbox"/> | | Concrete Floor | | | <input type="checkbox"/> | |
| Pile layout & footing sizes (including bearers) | Yes | No | N/A | Footing location | Yes | No | N/A | | |
| Joists layout & lateral support (for each level) | Yes | No | N/A | Load bearing thickenings | Yes | No | N/A | | |
| Floor heights (spot heights) | Yes | No | N/A | Floor level changes | Yes | No | N/A | | |
| Foundation bracing layout and calculations | Yes | No | N/A | Shrinkage control | Yes | No | N/A | | |
| Subfloor access | Yes | No | N/A | Slab dimensions (show vapour barrier) | Yes | No | N/A | | |
| Concrete ring foundation details | Yes | No | N/A | Rebate (bricks / panels) | Yes | No | N/A | | |
| Dimensions of all new foundations | Yes | No | N/A | Plumbing fixtures / subfloor pipework | Yes | No | N/A | | |
| <input type="checkbox"/> SECTION 5: FLOOR PLAN (1:100) COMPLETE FOR ALL NEW STRUCTURES OR ALTERATIONS TO EXISTING STRUCTURES | | | | | | | | | |
| Plan of all levels (new or altered) | Yes | No | N/A | All rooms designated | Yes | No | N/A | | |
| All demolition or structure removal | Yes | No | N/A | Framing layout (fully dimensioned) | Yes | No | N/A | | |
| Door size & position | Yes | No | N/A | Window size & position | Yes | No | N/A | | |
| Sanitary fixtures (WC, bath, shower, basins) | Yes | No | N/A | Kitchen layout | Yes | No | N/A | | |
| Lintel & beam sizes | Yes | No | N/A | Solid fuel or gas heater & installation specification | Yes | No | N/A | | |
| Stairs & balusters | Yes | No | N/A | Decks & balconies | Yes | No | N/A | | |
| Skylight positions | Yes | No | N/A | Ceiling access | Yes | No | N/A | | |

| | | | | | | | | |
|--|-----|-----|----|-----|----------------------------|-----|----|-----|
| | HWC | Yes | No | N/A | Smoke detectors (location) | Yes | No | N/A |
|--|-----|-----|----|-----|----------------------------|-----|----|-----|

☐ **SECTION 6: EXTERNAL (1:100/1:50)**
COMPLETE FOR NEW BUILDINGS OR ALTERATIONS TO THE EXTERNAL ENVELOPE

| | | | | | | | |
|--|-----|----|-----|---|-----|----|-----|
| Elevation of each face | Yes | No | N/A | Fixed & opening sashes | Yes | No | N/A |
| Accurate lines from boundary to boundary | Yes | No | N/A | Sill heights | Yes | No | N/A |
| District Plan daylight control planes | Yes | No | N/A | Cladding nominated on each face | Yes | No | N/A |
| Control joints (if required for cladding) | Yes | No | N/A | Ground levels in relation to floor levels | Yes | No | N/A |
| All doors & window openings | Yes | No | N/A | Sub floor ventilation | Yes | No | N/A |
| E2 Risk Matrix (a separate matrix is required for each face of the building) | | | | | Yes | No | N/A |

☐ **SECTION 7: CROSS SECTIONS & DETAILS (1:100)**
COMPLETE FOR ALL NEW STRUCTURES OR ALTERATIONS TO EXISTING STRUCTURES

| | | | | | | | |
|--|-----|----|-----|---|-----|----|-----|
| Foundation detail (all reinforcing & depth of footing) | Yes | No | N/A | Flashing systems to all openings, windows, doors, etc. | Yes | No | N/A |
| Stud heights (include overall heights from ground to apex) | Yes | No | N/A | Flashing tapes & air seals | Yes | No | N/A |
| Longitudinal and cross sections supplied | Yes | No | N/A | Finished ground levels in relation to floor levels | Yes | No | N/A |
| Identify timber treatments & grading | Yes | No | N/A | Cladding clearances to ground level or paving | Yes | No | N/A |
| Insulation systems & materials to floor, walls & ceiling | Yes | No | N/A | Stairs, handrails, decks | Yes | No | N/A |
| Roof cladding, eaves, fascias, gutters | Yes | No | N/A | Barriers providing safety from falling | Yes | No | N/A |
| Internal gutters, roof wall junctions | Yes | No | N/A | Framing sizes, beams, lintels, trusses incl. fixing details | Yes | No | N/A |
| Top plate strengthening where required | Yes | No | N/A | Fire rating systems to walls closer than 1m to boundary | Yes | No | N/A |
| Ceiling construction (battens, top plate) | Yes | No | N/A | Purlins, size, spacing, fixings | Yes | No | N/A |
| Exterior cladding details (including veneers) | Yes | No | N/A | Detail all junctions into cladding systems | Yes | No | N/A |

☐ **SECTION 8: BRACING PLAN (1:100/1:50)**
COMPLETE FOR ALL NEW STRUCTURES OR ALTERATIONS TO EXISTING STRUCTURES

| | | | | | | | |
|---|-----|----|-----|---|-----|----|-----|
| Location, type & number of bracing element | Yes | No | N/A | Bracing schedule & calculations (included in specification) | Yes | No | N/A |
| Indicate compliance with NZS3604 (latest version) | Yes | No | N/A | If specifically design include engineers calculations | Yes | No | N/A |

☐ **SECTION 9: ROOF FRAMING**
COMPLETE FOR ALL NEW STRUCTURES OR ALTERATIONS TO EXISTING STRUCTURES

| | | | | | | | |
|-------------------------------------|-----|----|-----|------------------------------|-----|----|-----|
| Truss layout | Yes | No | N/A | Rafter / Framing layout | Yes | No | N/A |
| Design certificate & fixing details | Yes | No | N/A | Rafter sizes, spans, fixings | Yes | No | N/A |

☐ **SECTION 10: SERVICES – PLUMBING & DRAINAGE**
COMPLETE FOR ALL PROJECTS WITH NEW INSTALLATION OR ALTERATION OF PLUMBING OR DRAINAGE SYSTEMS.

| | | | | | | | |
|---|-----|----|-----|--|-----|----|-----|
| Plumbing design standard (A/NZS 3500 / G12) | Yes | No | N/A | Drainage layout & design standard (A/NZS3500 / G13) | Yes | No | N/A |
| Plumbing reticulation system of hot & cold supply | Yes | No | N/A | All inspection bends & junctions | Yes | No | N/A |
| Hot water cylinder valve system diagrammatic | Yes | No | N/A | Sewer & Stormwater pipe sizes & falls | Yes | No | N/A |
| Hot water cylinder access | Yes | No | N/A | Calcs. for sizing & position of downpipes & internal gutters | Yes | No | N/A |
| Wastepipe sizes & falls | Yes | No | N/A | Council connection points | Yes | No | N/A |
| Isometric diagram for multi-level buildings | Yes | No | N/A | Septic tank & effluent disposal system incl. calculations | Yes | No | N/A |
| Water supply analysis (bore / spring) | Yes | No | N/A | HBRC resource consent for effluent disposal | Yes | No | N/A |

☐ **SECTION 11: SPECIFICATIONS**
COMPLETE FOR ALL NEW STRUCTURES OR ALTERATIONS TO EXISTING STRUCTURES

| | | | | | | | |
|---|-----|----|-----|--|-----|----|-----|
| Are required to be project specific | Yes | No | N/A | Details of all materials & fittings required for the project | Yes | No | N/A |
| To be divided into relevant trade sections | Yes | No | N/A | Identify compliance with the NZ Building Code | Yes | No | N/A |
| Sea spray requirements | Yes | No | N/A | Safety glazing requirements | Yes | No | N/A |
| Specific design calculations & details | Yes | No | N/A | List all Alternative Solutions | Yes | No | N/A |
| Structural calculations & producer statements | Yes | No | N/A | Alternative solutions calculations / producer statements | Yes | No | N/A |
| Fire safety systems | Yes | No | N/A | | | | |

☐ **SECTION 12: ADDITIONAL SPECIFICATIONS & REQUIREMENTS**
COMPLETE FOR ALL COMMERCIAL / INDUSTRIAL AND MULTI-UNIT RESIDENTIAL PROJECTS

| | | | | | | | |
|---------------------------------------|-----|----|-----|---|-----|----|-----|
| Fire safety report & associated plans | Yes | No | N/A | Access and facilities for people with disabilities | | | |
| Air conditioning system design | Yes | No | N/A | Accessible : Car park | Yes | No | N/A |
| Sprinkler system design | Yes | No | N/A | Toilet / shower compartment | Yes | No | N/A |
| Lift design | Yes | No | N/A | Lift / stairs, ramps & hand rails | Yes | No | N/A |

| | | | | | | |
|--|-----|----|-----|------------------------------------|-----|---------------|
| | | | | | o | |
| T-27.s1 schedule of specified systems + required attachments | Yes | No | N/A | Accommodation room space / counter | Yes | N o N/A |
| [Continued PTO...] | | | | Outdoor public areas | Yes | N o N/A |



SECTION 13: ADDITIONAL INFORMATION

COMPLETE FOR ALL APPLICATIONS

| | | | | | | |
|--|-----|----|-----|--|-----|---------------|
| Discussed application with councils planning staff | Yes | No | N/A | Work in road reserve/street crossing application filed | Yes | N o N/A |
| Resource consent has been applied for (No. _____) | Yes | No | N/A | New RAPID/street number required | Yes | N o N/A |
| Trade waste consent required | Yes | No | N/A | Service connection required: Water | Yes | N o N/A |
| Penetrometer/Ground test reports supplied | Yes | No | N/A | Stormwater | Yes | N o N/A |
| Geotech report supplied | Yes | No | N/A | Sewer | Yes | N o N/A |

LODGING YOUR APPLICATION – You will need to:

1. Complete the application form, sign it and attach all required information.
2. Deliver the application to Gisborne District Council customer services desk, or mail it to PO Box 747, Gisborne.
3. Incomplete applications will not be accepted (we will return the application and advise what information is required).
4. Attach receipt for lodgement fee/deposit (please see below #note 1).
5. Once your application has been accepted, please allow 20 working days for processing. However, if the information supplied is incomplete you will experience additional delays in obtaining your consent.
6. Council will contact you when your consent has been processed. An invoice for the balance of payment due will be mailed to you (see #note 2).
7. Work must not start until the invoice has been paid and the building consent documents have been issued to you.
8. In some cases, Resource Consent requirements may further restrict the start of the project.

For more information collect one of our Building Consent pamphlets available at our Gladstone Road office or download a copy from our web site www.gdc.govt.nz/building, or contact our duty officer on 06 869 2386.

#note 1: Lodgement fee/deposit – Your application will not be accepted if the following lodgement deposit is not paid

All applications: A deposit /application fee of \$ _____ applies.

(deposits listed below are current to 30 June 2022 only).

- | | |
|---|---------|
| ▪ Alterations or garage | \$650 |
| ▪ New Dwelling | \$1000 |
| ▪ Commercial up to and incl. \$1million | \$1,200 |
| ▪ Commercial or other above \$1 million | \$2,500 |

☐ I have enclosed a deposit/attached Council's receipt

- or, alternatively:

☐ I have paid a deposit by electronic banking of \$ _____ on _____ (date)

COUNCIL'S BANK ACCOUNT DETAILS:

Account No. 03 0638 0502288 00 Particulars: BC Deposit Code: _____ Particulars: _____
(surname) (project address)

#note 2: Building Consent Invoice:

On completion of processing (or withdrawal of the application), an invoice for the balance of payment will be sent to the owner/agent. Estimated inspection charges, levies and processing costs, including costs incurred through engagement of external expertise will be invoiced. The invoice must be paid and the consent uplifted within 30 days of approval or your consent may be refused. Processing costs will be recovered for all refused applications. Additional costs for amendments and extra inspections will be invoiced separately, prior to the issue of your code compliance certificate.

If this application is for a new building, a relocation or substantial renovation, you may be charged a footpath and or street damage deposit of \$1,000. An additional \$600.00 will also apply to relocations as a road sign damage deposit. Commercial buildings in the CBD will be charged \$300 per linear meter street frontage. Where relevant, the deposit will be invoiced with your building consent. A \$60.00 administration fee will be deducted from your refund along with any applicable repair costs.

Your consent may require payment of a Development Contribution (this generally applies to new habitable or commercial buildings). For more information contact Council's Development Contribution Officer. If a Development Contribution is required, a notice and invoice for the amount payable will be included with your building consent document.