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Application for: (tick box adjacent to applicable application type)

BUILDING CONSENT ONLY - PIM No. Issued

AMENDED BUILDING CONSENT

Section 45, Building Act 2004

BUILDING CONSENT No _____ (to be allocated by Council after application)

The Building:	The Owner:
Street Address:	Name:
.....	Owner Contact Person:
.....
Legal Description: Lot:	Mailing Address:
DP:
Building Name: [If applicable]	Street Address:
.....
Location within site/block:	Ph: Mob:
.....	Fax: After hrs:
Number of levels:	Email:
Level/Unit No: [If applicable]	Website:
Area:[Floor area of building work] M ²	
Current Use:	Proposed Use
Year first constructed [alterations/relocations]	Provide Agent contact details on next page
.....	

The following evidence of ownership is attached to this application: [tick where applicable]

- Certificate of Title
- Lease Agreement
- Agreement for Sale and Purchase
- Other

Agent: (if applicable)

Project Information Memorandum:

The following matters are involved in the project: [✓] if applicable

- | | |
|---|---|
| <input type="checkbox"/> Subdivision | <input type="checkbox"/> Alterations to land contours |
| <input type="checkbox"/> New or altered connections to public utilities | <input type="checkbox"/> New or altered locations and/or external dimensions of buildings |
| <input type="checkbox"/> New or altered access for vehicles | <input type="checkbox"/> Building work over or adjacent to any road or public place |
| <input type="checkbox"/> Disposal of stormwater and waste water | |
| <input type="checkbox"/> Other matters known to the applicant that may require authorisations from the territorial authority as listed below..... | <input type="checkbox"/> Building work over existing drains or sewers or in close proximity to wells or water mains |
| | |

Building Consent:

The following plans and specifications are attached to this application:(minimum of 2 sets sometimes 3 required if project to be forwarded to fire service)

- Plans Specifications Fire report Engineers calculations Bracing Calculations
 Effluent disposal design Stormwater treatment/disposal design Utility /Resource consents

Note these documents are independent of any documents required for resource consents i.e. provide separate sets of documents, including further information documents which are relevant to building and resource consent applications.

Waiver/Modification required? Yes/No specify over page

Compliance Schedule: [Delete if inapplicable]

The specified systems and features for this building are as follows: [✓]

The following specified systems and features are being altered, added to, or removed in the course of the building work: [*]

There are no specified systems or features in this building:

<input type="checkbox"/> Automatic Sprinkler Systems	<input type="checkbox"/> Automatic Fire Doors
<input type="checkbox"/> Emergency Warning Systems	<input type="checkbox"/> Emergency Lighting Systems
<input type="checkbox"/> Escape Route pressurisation systems	<input type="checkbox"/> Riser mains for Fire Service use
<input type="checkbox"/> Backflow preventers	<input type="checkbox"/> Lifts, escalators, travelators or other systems
<input type="checkbox"/> Mechanical ventilation and air conditioning	<input type="checkbox"/> Other mechanical, electrical, hydraulic or electronic systems
<input type="checkbox"/> Building maintenance units	<input type="checkbox"/> Signs as required by the Building Act or Code
<input type="checkbox"/> Means of escape	<input type="checkbox"/> Safety barriers
<input type="checkbox"/> Access & facilities for people with disabilities	<input type="checkbox"/> Fire Hose reels
<input type="checkbox"/> Signs as per Section 25 of the Disabled Person Community Welfare Act 1975	

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

Clause (tick relevant clause numbers of building Code for this project)	Means of Compliance (circle relevant means of compliance) Alt. S.=alternative solution	Waiver/modification required (state nature of waiver or modification of building code section required if any.
<input type="checkbox"/> B1 Structure	B1/AS1; B1/VM1; B1/AS2; B1/VM2; B1/AS3; B1/VM4; Alt. S. ;	
<input type="checkbox"/> B2 Durability	B2/AS1; B1/VM1 Alt. S	
<input type="checkbox"/> C1 Outbreak of fire	C1/AS1 or Alt. S.	
<input type="checkbox"/> C2 Means of escape	C/AS1 or Alt S. Fire Eng. Design	
<input type="checkbox"/> C3 Spread of fire	C/AS1 or Alt S. Fire Eng. Design	
<input type="checkbox"/> C4 Structural stability during fire	C/AS1 or Alt S. Fire Eng. Design	
<input type="checkbox"/> D1 Access routes	D1/AS1 or Alternative Solution.	
<input type="checkbox"/> D2 Mechanical installations for access	D2/AS1 or Alternative Solution	
<input type="checkbox"/> E1 Surface water	E1/AS1 or E1/VM1 Alt. S	
<input type="checkbox"/> E2 External moisture	E2/AS1; E2/VM1; Alt. S	
<input type="checkbox"/> E3 Internal moisture	E3/AS1 or Alternative Solution	
<input type="checkbox"/> F1 Hazardous agents on site	F1/VM1 or Alternative Solution	
<input type="checkbox"/> F2 Hazardous building materials	F2/AS1 or Alternative Solution	
<input type="checkbox"/> F3 Hazardous substances & processes	F3/AS1 or Alternative Solution	
<input type="checkbox"/> F4 Safety from falling	F4/AS1 or Alternative Solution	
<input type="checkbox"/> F5 Construction & demolition hazards	F5/AS1 or Alternative Solution	
<input type="checkbox"/> F6 Lighting for emergency	F6/AS1 or F6/VM1 Alt. S	
<input type="checkbox"/> F7 Warning systems	F7/AS1 or Alternative Solution	
<input type="checkbox"/> F8 Signs	F8/AS1 or Alternative Solution	
<input type="checkbox"/> G1 Personal Hygiene	G1/AS1 or Alternative Solution	
<input type="checkbox"/> G2 Laundering	G2/AS1 or Alternative Solution	
<input type="checkbox"/> G3 Food preparation & prevention of contamination	G3/AS1 or Alternative Solution	
<input type="checkbox"/> G4 Ventilation	G4/AS1 or G4/VM1 Alt. S	
<input type="checkbox"/> G5 Interior environment	G5/AS1 or Alternative Solution	
<input type="checkbox"/> G6 Airborne & impact sound	G6/AS1 or Alternative Solution	
<input type="checkbox"/> G7 Natural light	G7/AS1 or Alternative Solution	
<input type="checkbox"/> G8 Artificial light	G8/AS1 or Alternative Solution	
<input type="checkbox"/> G9 Electricity	G9/AS1(disabled requirements) Energy Act & electrical reg's	
<input type="checkbox"/> G10 Piped services [piping of dangerous substances in buildings]	G10/AS1(gas); Alternative Solution	
<input type="checkbox"/> G11 Gas as an energy source	G11/AS1; Energy Act & Gas reg's	
<input type="checkbox"/> G12 Water supplies	G12/AS1; Alt.S. to G12/VM1	
<input type="checkbox"/> G13 Foul water	G13/AS1; G13/AS2; G13/VM1	
<input type="checkbox"/> G14 Industrial liquid waste	G14/AS1; Alt. S. to G14/VM1	
<input type="checkbox"/> G15 Solid waste	G15/AS1 or Alternative Solution	
<input type="checkbox"/> H1 Energy efficiency	H1/AS1 or Alt. S. to H1/VM1	

Attachments:

The following documents are also attached to this application: [✓]

Land Title Information and registered notices on title		Development Contribution Notice	
Project Information Memorandum		Certificate attached to PIM	
Copies of other Authorisations		Other	

Restricted Building Work and Licensed Building Practitioners:[applicable after 30/11/2009]

Restricted Building Work:	Licensed Building Practitioner:	Licence No:
	Name: Address: Phone:	
	Name: Address: Phone:	
	Name: Address: Phone:	
	Name: Address: Phone:	
	Name: Address: Phone:	

BCA [Council] Office Use Only:

Receipt Number:	PIM approved by: Date:
Date of Receipt:	Building Consent approved by: Date:
Receiving Officer:	Fire Service Notified: Yes / No Date: Date Response received?
Date application received:	Section 37 (resource consent required) Notice Required?: Yes / No
Date application accepted:	Development Fees Notice required: yes / no