

BUILDING CONSENT / PIM ACTION SHEET / CONSENT NO 97/ \_\_\_\_\_

|                                                                                                                                                                                                           |  | W/Held       | Issue                                                                                          |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--------------|------------------------------------------------------------------------------------------------|
| <u>Planning Guidance</u><br>Zone: Residential Low<br>Underlying / Overlay Zone: _____<br>Activity: Permitted<br>Resource Consent: Required/Not Required/ Currently being processed /Approved<br>Comments: |  | Log no: M19. | <br>19/8/97 |
| <u>Health</u>                                                                                                                                                                                             |  |              | ✓                                                                                              |
| <u>Streets &amp; Pavements</u>                                                                                                                                                                            |  |              | ✓                                                                                              |
| <u>Water</u>                                                                                                                                                                                              |  |              | ✓                                                                                              |
| <u>Drainage</u>                                                                                                                                                                                           |  |              | ✓                                                                                              |
| <u>Plumbing &amp; Drainage</u><br>18, 20                                                                                                                                                                  |  |              | ✓                                                                                              |
| <u>Building</u><br>9.                                                                                                                                                                                     |  |              | <br>19/8  |

MR,CN,GIBBS  
28 CHEQUERS AVE  
HAMILTON

20/08/97

97/1908

GIBBS,CN,MR

28 CHEQUERS AV

|                      |           |       |      |       |
|----------------------|-----------|-------|------|-------|
| PLAN REVIEW FEE      | BLDCON991 | 17.78 | 2.22 | 20.00 |
| PROJECT INFORMATION  | BLDPLC992 | 22.22 | 2.78 | 25.00 |
| BUILDING CONSENT     | BLDCON991 | 13.33 | 1.67 | 15.00 |
| MICROFILMING         | BLDMIC925 | 17.78 | 2.22 | 20.00 |
| CODE COMPLIANCE CERT | BLDCON995 | 13.33 | 1.67 | 15.00 |

84.44 10.56 95.00

95.00

GIBBS C N 28 CHEQUERS

CN GIBBS C N 28 CHEQUERS

|                    |       |
|--------------------|-------|
| 013300010000020991 | 20.00 |
| 013400000000020992 | 25.00 |
| 013300010000020991 | 15.00 |
| 013400020000020925 | 20.00 |
| 013300010000020995 | 15.00 |

971908

654540

TOTAL: \$95.00  
20-Aug-97 Cash Tendered \$0.00  
Cheque Tendered \$95.00  
Change \$0.00

CP:23/TT:607



# **Quality Assurance Checklist For Checking Application (Drainage/Plumbing)**

Please place a tick in the appropriate box



## **Application Form**

|                                                                                                                                                                                                                       | Yes                                 | No                       | Office Use                          |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|
| 1. All sections completed, including:                                                                                                                                                                                 |                                     |                          |                                     |
| - accurate valuations of works                                                                                                                                                                                        | <input checked="" type="checkbox"/> |                          | <input checked="" type="checkbox"/> |
| - correct legal description. (refer to your rates demand and/or certificate of title                                                                                                                                  | <input type="checkbox"/>            |                          | <input checked="" type="checkbox"/> |
| - valuation number (see above)                                                                                                                                                                                        | <input checked="" type="checkbox"/> |                          | <input checked="" type="checkbox"/> |
| - name, address, telephone number, fax (as applicable).                                                                                                                                                               | <input checked="" type="checkbox"/> |                          | <input checked="" type="checkbox"/> |
| - contact name (address, telephone, fax [if not the owner]).                                                                                                                                                          | <input checked="" type="checkbox"/> |                          | <input checked="" type="checkbox"/> |
| - project location (street address)                                                                                                                                                                                   | <input checked="" type="checkbox"/> |                          | <input checked="" type="checkbox"/> |
| - declaration signed and dated                                                                                                                                                                                        |                                     |                          |                                     |
| 2. Copy of certificate of title (this is available from Lands and Titles Service 1st Floor Westpac building situated on corner Victoria street and Alma street.) Alternatively we can supply a copy at the cost of \$ | <input type="checkbox"/>            | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

## **Office Use Only**

3. Enter property ID from database



BC1/2m  
version 1 20/12/96



## Plans

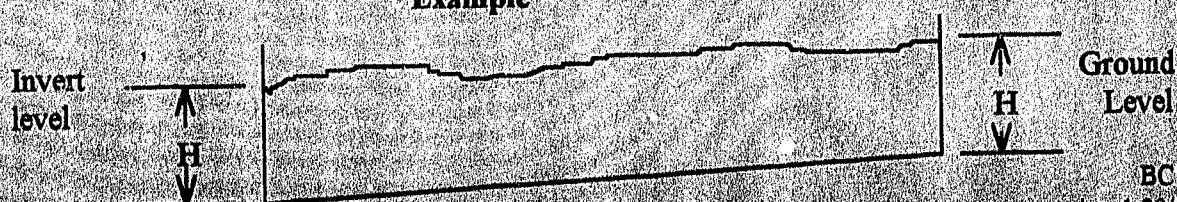
|                                                                                                                                                                       | Yes                                 | No                       | Office Use                          |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|--------------------------|-------------------------------------|
| 4 Two copies of each                                                                                                                                                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 5 Site plan to a scale of 1:200 showing existing and proposed stormwater and sewer as drains as appropriate<br>-include Public drains as appropriate                  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| 6 Single line drawing to scale of 1:100 of floor plan (section as appropriate) of building showing position of new or altered fittings. (e.g. shower, bath and basin) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

## Cross Section

- 7 A longitudinal section of sanitary sewer showing invert levels at connection of private to public drains and distance from this connection point to the head of the drain. i.e. longitudinal drawing showing the level of the drain in relation to ground levels.

☐ ☒ ☒

### Example



BC1/2m  
version 1 20/12/96



**Specification**

|                                                                                                                                      | Yes                                 | No                                  | Office Use                          |
|--------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------|-------------------------------------|-------------------------------------|
| 8. A written specification either on the plans or a separate sheet stating the type of materials to be used. e.g. copper and/or PVC. | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| 9. Specify type of tempering valve to be fitted                                                                                      | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> |
| Brand name/type .....                                                                                                                |                                     |                                     |                                     |
| 10. Plumber <i>P. Brown Plumber</i> .....                                                                                            | <input checked="" type="checkbox"/> |                                     | <input checked="" type="checkbox"/> |
| Registration No. <i>03587</i> .....                                                                                                  |                                     |                                     |                                     |
| Drainlayer .....                                                                                                                     | <input type="checkbox"/>            |                                     | <input type="checkbox"/>            |
| Registration No. ....                                                                                                                |                                     |                                     |                                     |

Reviewer

*P. Brown* Date *19/8/97*