

Project Information Memorandum/Building Consent Application

BAM 002 PIM BC

Form 2

VER. 10

Updated: Jan 2022

Review: Jan 2023

Section 33 or Section 45, Building Act 2004

Please return this form to: building@adc.govt.nz or Ashburton District Council, PO Box 94, Ashburton 7740

For Office Use Only:

BC No:

Date Received:

Application (Only complete items that are applicable to your project)

I request that you issue a:

Project Information Memorandum (PIM) <input type="checkbox"/>	Building Consent <input type="checkbox"/> <small>*Your project may also require a PIM, you will be advised when you submit your application if this is required</small>	Building Consent and PIM <input type="checkbox"/>
Has a PIM been issued previously in respect of this project? If yes , please provide a copy if applicable.	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is this project related to earthquake damage?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is this consent for a relocated or transportable building?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Building Information

Building Name (if any):		
Street Address (or Rapid No.):		
Legal Description:		Valuation No:
No. of levels:	Approx. Year constructed?	Level\Unit No:
Currently lawfully established use:		
Swimming/Spa Pool: Is there a swimming pool/spa pool on this site or associated with this project?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Total Floor Area (all floors, m ²):	Want to add (m ²):	

The Owner

Owner's Name:	
Contact Person (if different from owner):	
Mail/ Billing Address:	
Street Address/Registered Office:	
Daytime Phone No:	Cellphone:
Email Address:	After Hours No:



Ashburton
DISTRICT COUNCIL

The Agent

Note: The Agent will be the first point of contact for communications with the Council/Building Consent Authority regarding this application/building work and will receive all correspondence including all invoices.

Agent's Name:

Contact Person (if Agent is not an individual):

Mailing/Billing Address:

Street Address/Registered Office:

Daytime Phone No:

Cellphone:

Email Address:

After Hours No:

The Project

Description of building work (E.g. dwelling, commercial, farm shed, garage etc.):

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

Yes

No

If **yes**, please provide details on intended use:

Intended life of the building:

Indefinite but not less than 50 years

OR Specified as years

Is this project being completed in Phases/Stages?

Yes

No

If so, what stage is this application? (of)

Related BC Numbers:

List Building Consents previously issued for this building (if any):

Estimated Value of Building Work on which levy will be calculated (inc. GST) as defined in Section 7 of the Building Act 2004:

Restricted Building Work

Will the building work include any restricted building work? If **yes**, please provide the following details on all Licenced Building Practitioners involved. If these details are unknown at time of application, they must be supplied before work begins.

Yes

No

Note 1: For the table on the following page, enter the Licensed Building Practitioner (LBP) number or registration number if treated as being licensed under Section 291 of Building Act 2004.

Note 2: A Memoranda/Certificate of Design Work must be submitted for each LBP involved in the Design work. This form can be downloaded from ashburtondc.govt.nz

Name	Licence Class	LBP No.	Mailing Address	Phone No.	Work carried out or supervised

Project Information Memorandum

Tick the matters relevant to the project. **Complete this section only if you have applied for a PIM:**

- ☐ Subdivision
- ☐ Alteration to land contours
- ☐ New or altered connections to public utilities
- ☐ New or altered locations and/or external dimensions of the buildings
- ☐ New or altered access for vehicles
- ☐ Building work over or adjacent to any road or public place
- ☐ Disposal of storm water and waste water
- ☐ Building work over any existing drains or sewers or in close proximity to wells or water mains
- ☐ Rapid Numbers
- ☐ Other matters known to the applicant that may require authorisations from the territorial authority.
Please specify:

Note: Development Contributions may be levied in cases where extra demand for services is required. Refer to our 'Customer Guide for Development Contributions' for more information.

Building Consent

Complete this section only if you have applied for a building consent:

Note: All plans and specifications must meet minimum requirements set out in the regulations or required by the Building Consent Authority.

The building work will comply with the Building Code as follows:

BUILDING CODE CLAUSE		MEANS OF COMPLIANCE (refer to the relevant compliance document(s) or detail of alternative solution in the plans & specifications; if not applicable, put n/a)	WAIVER/MODIFICATION REQUIRED (state nature of waiver or modification of building code required)
B1	Structure	NZS3604 <input type="checkbox"/> NZS1170 <input type="checkbox"/> NZS4229 <input type="checkbox"/> B1/AS1 <input type="checkbox"/> B1/AS2 <input type="checkbox"/> B1/AS3 <input type="checkbox"/> B1/AS4 <input type="checkbox"/> Other:	
B2	Durability	B2/AS1 <input type="checkbox"/> NZS3101 <input type="checkbox"/> NZS3602 <input type="checkbox"/> NZS3604 <input type="checkbox"/> Other:	
C1	Objective	C/AS1 – C/AS7 <input type="checkbox"/> C/VM1 <input type="checkbox"/> C/VM2 <input type="checkbox"/> Other:	
C2	Prevention of Fire Occurring	C/AS1 – C/AS7 <input type="checkbox"/> C/VM1 <input type="checkbox"/> C/VM2 <input type="checkbox"/> Other:	
C3	Fire Affecting Areas Beyond Fire Source	C/AS1 – C/AS7 <input type="checkbox"/> C/VM1 <input type="checkbox"/> C/VM2 <input type="checkbox"/> Other:	
C4	Movement to a Safe Place	C/AS1 – C/AS7 <input type="checkbox"/> C/VM1 <input type="checkbox"/> C/VM2 <input type="checkbox"/> Other:	
C5	Access and Safety for Fire-Fighting Operations	C/AS1 – C/AS7 <input type="checkbox"/> C/VM1 <input type="checkbox"/> C/VM2 <input type="checkbox"/> Other:	
C6	Structural Stability	C/AS1 – C/AS7 <input type="checkbox"/> C/VM1 <input type="checkbox"/> C/VM2 <input type="checkbox"/> Other:	
D1	Access Routes	D1/AS1 <input type="checkbox"/> NZS4121 <input type="checkbox"/> Other:	
D2	Mechanical installations for access	D2/AS1 <input type="checkbox"/> NZS4332 <input type="checkbox"/> EN81 <input type="checkbox"/> D2/AS2 <input type="checkbox"/> D2/AS3 <input type="checkbox"/> Other:.....	
E1	Surface water	E1/AS1 <input type="checkbox"/> AS/NZS3500.3 <input type="checkbox"/> Other:	
E2	External moisture	E2/AS1 <input type="checkbox"/> E2/AS2 <input type="checkbox"/> E2/AS3 <input type="checkbox"/> E2/AS4 <input type="checkbox"/> Specific design & testing <input type="checkbox"/>	
E3	Internal moisture	E3/AS1 <input type="checkbox"/> ES/AS2 <input type="checkbox"/> Other:	
F1	Hazardous agents on site	F1/AS1 <input type="checkbox"/> Other:	
F2	Hazardous building materials	F2/AS1 <input type="checkbox"/> NZS4223 <input type="checkbox"/> Other:	
F3	Hazardous substances and processes	F3/VMI <input type="checkbox"/> Other:	

F4	Safety from falling	F4/AS1 <input type="checkbox"/> FSP Act <input type="checkbox"/> Other:	
F5	Construction and demolition hazards	F5/AS1 <input type="checkbox"/> Other:	
F6	Lighting for emergency	F6/AS1 <input type="checkbox"/> Other:	
F7	Warning systems	F7/AS1 <input type="checkbox"/> NZS4512 <input type="checkbox"/> Other:	
F8	Signs	F8/AS1 <input type="checkbox"/> Other:	
G1	Personal hygiene	G1/AS1 <input type="checkbox"/> Other:	
G2	Laundering	G2/AS1 <input type="checkbox"/> Other:	
G3	Food prep. And prevention of contamination	G3/AS1 <input type="checkbox"/> Other:	
G4	Ventilation	G4/AS1 <input type="checkbox"/> AS1668.2 <input type="checkbox"/> Other:	
G5	Interior environment	G5/AS1 <input type="checkbox"/> Other:	
G6	Airborne and impact sound	G6/AS1 <input type="checkbox"/> Other:	
G7	Natural light	G7/AS1 <input type="checkbox"/> Other:	
G8	Artificial light	G8/AS1 <input type="checkbox"/> NZS6703 <input type="checkbox"/> Other:	
G9	Electricity	G9/AS1 <input type="checkbox"/> Other:	
G10	Piped services	G10/AS1 <input type="checkbox"/> NZS5601 <input type="checkbox"/> Other:	
G11	Gas as an energy source	G11/AS1 <input type="checkbox"/> Other:	
G12	Water supplies	G12/AS1 <input type="checkbox"/> G12/AS2 <input type="checkbox"/> AS/NZS3500.1 <input type="checkbox"/> AS/NZS3500.4 <input type="checkbox"/> Other:	
G13	Foul water	G13/AS1 <input type="checkbox"/> G13/AS2 <input type="checkbox"/> G13/AS3 <input type="checkbox"/> BS5572 <input type="checkbox"/> AS/NZS3500.2 <input type="checkbox"/> Other:	
G14	Industrial liquid waste	G14/AS1 <input type="checkbox"/> Other:	
G15	Solid waste	G15/AS1 <input type="checkbox"/> Other:	
H1	Energy efficiency provisions	H1/AS1 <input type="checkbox"/> NZS4218 <input type="checkbox"/> NZS4243 <input type="checkbox"/> ALF Design Manual <input type="checkbox"/> NZS4214 <input type="checkbox"/> Other:	

Compliance Schedule

Not applicable if applying for a Project Information Memorandum (PIM) only)

Specified systems associated with this project			
Are there any specified systems being altered, added or to be removed in the course of the building work associated with this project? (specified systems are defined in regulations)			Yes <input type="checkbox"/> No <input type="checkbox"/>
SS Code	Specified Systems Note: A Specified System Information Template must be completed for each Specified System. This form can be downloaded from ashburtondc.govt.nz	Applicable Systems	Specified System Information Template Completed?
1	Automatic systems for fire suppression <i>(for example, sprinkler systems)</i>		
2	Automatic emergency warning systems for fire or other dangers <i>(other than a warning system for fire that is entirely within a household unit and serves only that unit)</i>		
3	Electromagnetic or automatic doors or windows <i>(for example, ones that close on fire alarm activation)</i>		
4	Emergency lighting systems		
5	Escape route pressurisation systems		
6	Riser mains for use by fire services		
7	Automatic backflow preventers connected to a potable water supply		
8	Lifts, escalators, travelators, or other systems for moving people or goods within buildings		
9	Mechanical ventilation or air conditioning systems		
10	Building maintenance units providing access to exterior and interior walls of buildings		
11	Laboratory fumes cupboards		
12	Audio loops or other assistive listening systems		
13	Smoke control systems		
14	Emergency power systems for, or signs relating to, a system of feature specified in any clauses of 1 - 13		
15	Any or all of the following systems and features, so long as they form part of a building's means of escape from fire, and so long as those means also contain any or all of the systems or features specified in clauses 1 - 6, 9, and 13		
15a	Systems for communicating spoken information intended to facilitate evacuation; and		
15b	Final exits <i>(as defined by clause A2 of the building code)</i> ; and		
15c	Fire separations <i>(as so defined)</i> ; and		
15d	Signs for communicating information intended to facilitate evacuation; and		
15e	Smoke separations <i>(as so defined)</i>		
16	Cable Cars		
Purpose Groups:		Fire Hazard Category:	Max. Occupant Load:

Required Attachments

Please ensure that you have included these documents to your application. **Tick the documents that you have attached.**

- | | |
|--------------------------|--|
| <input type="checkbox"/> | Plans and Specifications (2 copies for Residential and Commercial PIM only – 1 copy of Site Plans, Floor Plan and Elevations) |
| <input type="checkbox"/> | Project Information Memorandum |
| <input type="checkbox"/> | Certificate attached to Project Information Memorandum |
| <input type="checkbox"/> | Development Contribution NoticeNew or altered access for vehicles |
| <input type="checkbox"/> | Evidence of Ownership |
| <input type="checkbox"/> | Building Consent Application Checklist (Residential or Commercial) |
| <input type="checkbox"/> | Memoranda (Certificate of Design Work) from each Licensed Building Practitioner who carried out or supervised any design work that is restricted building work |
| <input type="checkbox"/> | Specified System Information Template for each Specified System |
| <input type="checkbox"/> | Application fee (Refer to our current Schedule of Fees and Charges at ashburtondc.govt.nz) |

Note: All plans and specifications must meet minimum requirements set out in the regulations or required by the Building Consent Authority.

Notes by Applicant (Please include any notes or comments you may wish to add)

Method of Payment

Cash <input type="checkbox"/>	Direct Credit <input type="checkbox"/>	Eftpos <input type="checkbox"/>
Credit Card <input type="checkbox"/>		
Fee payer for lodgement fees:		
Fee payer for processing fees prior to BC uplift:		
Fee payer for fees incurred after BC uplift:		

Note: For direct credit, please make payment to account number 03-1592-0521970-00 include name of applicant and the Building Consent Number (if known). If you don't know the Building Consent number, please enter letters BC in the reference field. This will enable us to match your payment and prevent delays in processing your request.

Privacy Act 2020

Applicants for Building Consents are advised that the details provided on the Building Consent Application form are required to be held in a public register and on file where they may be perused by any interested individual. A summary of information compiled from these forms is also provided to the Councils Valuation Service Provider, the Ministry of Business Innovation and Employment, Building Research Association, the media and on request, to the public. The consequence of not providing information is that a Building Consent will not be issued.

Signature

Declaration: I declare as owner or agent of the owner, that I have provided all the information requested on this form, in relation to the project site, known to the owner and agent. I am aware that withholding any such information may invalidate the Project Information Memorandum and the Building Consent issued by Council.

Signed by Owner or on behalf of the owner:

Date:

.....

Name: