

From: "RLC Building Services"
Sent: Thu, 28 Nov 2024 11:19:12 +1300
To: ""info@leisurecom.co.nz"" <info@leisurecom.co.nz>
Subject: BC24-011274 - 13 Ross Road
Attachments: Advice of Licensed Building Practitioner(s).pdf, Form 6A Memorandum from licensed building practitioner Record of building work.pdf, Application for CCC - Form 6.pdf

Kia ora,

Please click on the link to access the approved building consent documents:

<https://onecouncil.rdc.govt.nz/T1Prod/CiAnywhere/Web/PROD/ECMCore/BulkAction/Get/a1bdb0da-2b59-4c89-bfdd-5746d87f9c18>

This link will expire on 8 December 2024, 11:16 AM.

YOUR BUILDING CONSENT CONTAINS RESTRICTED BUILDING WORK.

*Licensed building practitioners **must** be nominated before any inspections can be booked.*

*The owner or agent is required to complete the attached Advice of Licensed Building Practitioner form and return to council ASAP, or email the form to buildingadmin@rotorualc.nz **prior to booking** the first inspection.*

Ngā mihi,

Kim Rowlands Business Support Administrator, Integrated Planning & Development

P: 07 346 5646

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A: 1061 Haupapa St, Private Bag 3029, Rotorua Mail Centre, Rotorua 3046, New Zealand



ROTORUA LAKES COUNCIL

Te Kaunihera o ngā Roto o Rotorua



ADVICE OF LICENSED BUILDING PRACTITIONER/(S) Section 87, Building Act 2004

1 THE BUILDING (project location)

Building name (if applicable) _____

Building street address: _____

2. THE PROJECT

Building consent number: _____

3. THE OWNER (must be completed and all details must be the owner's)

Owner's name (for individuals, state the preferred form of title, e.g. Mr, Mrs, Ms, Miss, Dr. For companies, trusts and other organisations provide a contact person's name): _____

Address: _____

Date: _____ Landline: _____

Mobile: _____ After Hours: _____

Fax: _____ E-mail: _____

4. LICENSED BUILDING PRACTITIONERS ENGAGED TO CARRY OUT/SUPERVISE RESTRICTED BUILDING WORK

Particular work to be carried out or supervised	Name, address, email, and phone number of Licensed Building Practitioner	Licensed Building Practitioner number (or registration number if treated as being licensed under section 291 of Act)	Licensing class (Tick box) ☒
	Name: _____		Foundations ☐
	Address: _____		Carpenter ☐
	Email: _____		Bricklayer ☐
	Telephone: _____		Plasterer ☐
			Roofer ☐
	Name: _____		Foundations ☐
	Address: _____		Carpenter ☐
	Email: _____		Bricklayer ☐
	Telephone: _____		Plasterer ☐
			Roofer ☐

4. LICENSED BUILDING PRACTITIONERS ENGAGED TO CARRY OUT/SUPERVISE RESTRICTED BUILDING WORK (cont.)

Particular work to be carried out or supervised	Name, address, email, and phone number of Licensed Building Practitioner	Licensed Building Practitioner number (or registration number if treated as being licensed under section 291 of Act)	Licensing class (Tick box) ✓ ☐
	Name: _____ Address: _____ Email: _____ Telephone: _____		Foundations ☐ Carpenter ☐ Bricklayer ☐ Plasterer ☐ Roofer ☐
	Name: _____ Address: _____ Email: _____ Telephone: _____		Foundations ☐ Carpenter ☐ Bricklayer ☐ Plasterer ☐ Roofer ☐
	Name: _____ Address: _____ Email: _____ Telephone: _____		Foundations ☐ Carpenter ☐ Bricklayer ☐ Plasterer ☐ Roofer ☐
	Name: _____ Address: _____ Email: _____ Telephone: _____		Foundations ☐ Carpenter ☐ Bricklayer ☐ Plasterer ☐ Roofer ☐
	Name: _____ Address: _____ Email: _____ Telephone: _____		Foundations ☐ Carpenter ☐ Bricklayer ☐ Plasterer ☐ Roofer ☐

SIGNATURE

Signature of owner/agent on behalf of and with the authority of the owner *[delete one]*:

Name of person signing:

Date:

COUNCIL USE ONLY

LBP(s) checked

Y ☐

All OK

Y ☐

N ☐

Comments:

Form 6A

Memorandum from licensed building practitioner: Record of building work

Section 88, Building Act 2004

THE BUILDING

Street address of building: _____

THE PROJECT

Building consent number: _____

THE OWNER

Name: _____
Address: _____

Phone : _____ or Mobile: _____
Email: _____ Fax: _____

RECORD OF WORK THAT IS RESTRICTED BUILDING WORK

Work that is restricted building work	Description	Carried out/ supervised
[Tick]	[If necessary, describe the restricted building work]	[Specify whether you carried out this design work or supervised someone else carrying out this design work]
Primary structure		
Foundations and subfloor framing ☐		☐ Carried out ☐ Supervised
Walls ☐		☐ Carried out ☐ Supervised
Roof ☐		☐ Carried out ☐ Supervised
Columns and beams ☐		☐ Carried out ☐ Supervised

Primary structure cont'd		
Bracing ☐		☐ Carried out ☐ Supervised
Other ☐		☐ Carried out ☐ Supervised
External moisture management systems		
Damp proofing ☐		☐ Carried out ☐ Supervised
Roof cladding or roof cladding system ☐		☐ Carried out ☐ Supervised
Ventilation system for example, subfloor or cavity) ☐		☐ Carried out ☐ Supervised
Wall cladding or wall cladding system ☐		☐ Carried out ☐ Supervised
Waterproofing ☐		☐ Carried out ☐ Supervised
Other ☐		☐ Carried out ☐ Supervised
Note: continue on another page if necessary.		

ISSUED BY:		
Name: _____		
LBP number: _____		
Class(es) licensed in: _____		
Plumbers, Gasfitters and Drainlayers Registration Number [if applicable]: _____		
Mailing address: _____		
Street address or registered office: _____		
Phone No: Landline: _____ Daytime: _____ Fax: _____ Mobile: _____ After hours: _____		
Email address: _____ Website: _____		

DECLARATION
I _____ <i>[name of practitioner]</i> carried out or supervised the restricted building work recorded on this form. Signature: _____ Date: _____

ROTORUA LAKES COUNCIL

Te Kaunihera o ngā Roto o Rotorua



Form 6 APPLICATION FOR CODE COMPLIANCE CERTIFICATE Section 92, Building Act 2004

THE BUILDING CONSENT

Building consent number: _____

Issued by [name of building consent authority that granted building consent]: _____

THE OWNER

Name of owner [include preferred form of address, eg, Mr, Miss, Dr, if an individual]: _____

Contact person [if the applicant is not an individual]: _____

Mailing address: _____

Street address/registered office: _____

Phone number: Landline: _____ Mobile: _____

Daytime: _____ After hours: _____

Facsimile number: _____

Email address: _____ Website [if applicable]: _____

The following evidence of ownership is attached to this application [copy of record of title, lease, agreement for sale and purchase, or other document showing full name of legal owner(s) of the building]:

AGENT

[Only complete this section if the application is being made on behalf of the owner]

Name of agent: _____

Contact person [if the agent is not an individual]: _____

Mailing address: _____

Street address/registered office: _____

Phone number: Landline: _____ Mobile: _____

Daytime: _____ After hours: _____

Facsimile number: _____

Email address: _____ Website [if applicable]: _____

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

First point of contact for communications with the council/building consent authority [state full name, mailing address, phone number(s), facsimile number(s), and email address(es). Contact details must be in New Zealand]:

APPLICATION

All building work to be carried out under the above building consent was completed on [insert date]: _____

The licensed building practitioner(s) who carried out or supervised the restricted building work is/are as follows:

Name	Licensing class	Licensed building practitioner number (or registration number if treated as being licensed under section 291 of Building Act 2004)	Particular work carried out or supervised

The personnel who carried out building work other than restricted building work are as follows:

[List names, addresses, telephone numbers, and (where relevant and if not provided above) licensed building practitioner numbers or Plumbers, Gasfitters, and Drainlayers Board registration numbers]

Note: continue on another page if necessary

The following specified systems are contained on the compliance schedule for the building and, in the opinion of the personnel who installed them, are capable of performing to the performance standards set out in the building consent:

[list specified systems]

I request that you issue a code compliance certificate for this work under section 95 of the Building Act 2004.

The code compliance certificate should be sent to: [state which address, and whether owner or agent]

Signature of owner/agent on behalf of and with the authority of the owner [delete one]: _____

Name of person signing: _____

Date: _____

ATTACHMENTS

The following documents are attached to this application:

- ☐ Memoranda (Records of Building Work) from licensed building practitioner(s) stating what restricted building work they carried out or supervised
- ☐ Other documents from the personnel who carried out the work
- ☐ Certificates that relate to the energy work.
- ☐ Evidence that specified systems are capable of performing to the performance standards set out in the building consent