

Memorandum from licensed building practitioner:
Record of Building Work
Section 88, Building Act 2004

THE BUILDING	
Street address:	196 KING STREET
Suburb:	KOPEPEO
Town/City:	WHAKATANE
Postcode:	3120

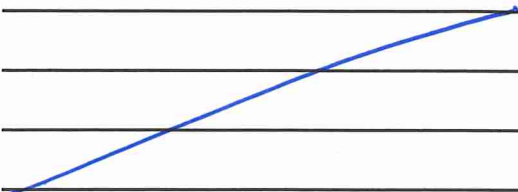
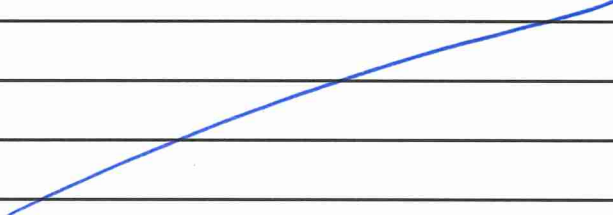
THE PROJECT
Building consent number:

BC 210077.2

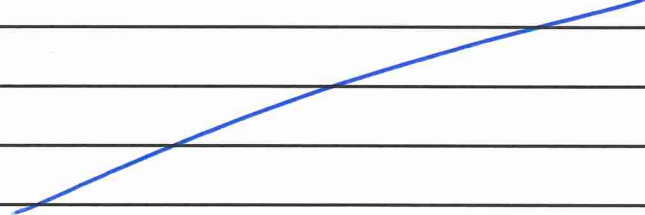
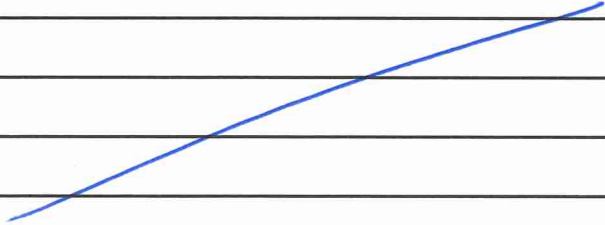
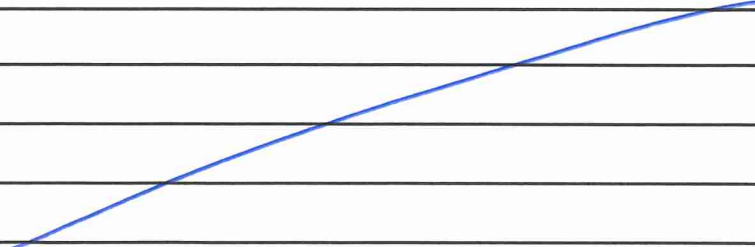
THE OWNER(S)	
Name(s):	ADRIAN HART
Mailing address:	196 KING STREET
Suburb:	KOPEPEO
PO Box/Private Bag:	
Town/City:	WHAKATANE
Postcode:	3120
Phone number:	027 438 7146
Email address:	conservatoriesbydesign@hotmail.com

RECORD OF WORK THAT IS RESTRICTED BUILDING WORK		
PRIMARY STRUCTURE		
Work that is restricted building work	Description of restricted building work	Carried out or supervised
Tick ☒	If necessary, describe the restricted building work	Tick ☒ whether you carried out the work or supervised someone else.
Foundations and subfloor framing ☒	NEW BRACING PILES AND HARDWARE AS SHOWN AND INSPECTED	☐ Carried out ☒ Supervised
Walls ☒	INSTALLED HARDWARE TO BRACE WALL ONLY	☐ Carried out ☒ Supervised

PRIMARY STRUCTURE

Roof	☐		☐ Carried out ☐ Supervised
Columns and beams	☒	NEW HYSPAN BEAMS AND HARDWARE AS SHOWN AND INSPECTED	☐ Carried out ☒ Supervised
Bracing	☒	BRACE - LINE GIB ELEMENTS ONLY - AS SHOWN AND INSPECTED.	☐ 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

EXTERNAL MOISTURE MANAGEMENT SYSTEMS CONTINUED

Wall cladding or wall cladding system ☐		☐ Carried out ☐ Supervised
Waterproofing ☐		☐ Carried out ☐ Supervised
Other ☐		☐ Carried out ☐ Supervised

ISSUED BY

Name and contact details of the licensed building practitioner who is licensed to carry out or supervise restricted building work.

Name: SIMON WREN	LBP number: BP 108851
Class(es) licensed in: CARPENTRY	
Plumbers, Gasfitters and Drainlayers registration number (if applicable): N/A	
Mailing address (if different from below):	
Street address/Registered office: 159 COMMERCE STREET	
Suburb: CBD	Town/City: WHAKATANE 3120
PO Box/Private Bag: PO BOX 715	Postcode: 3158
Phone number: (07) 308 8332	Mobile: 021 974 607
After hours:	Fax:
Email address: simon@wrenbuildingtd.co.nz	Website:

DECLARATION

I, SIMON WREN ~~carried out~~ or supervised the restricted building work recorded on this form.

Signature: Date: 08.04.2021