

ORIGINAL

BUILDING PERMIT

*Refer to cover for general instructions regarding completion of this form.

1. LOCATION AND OWNERSHIPLocal Authority: Te Araroa Bor. C1 Date: 10/5/77Number on Valuation Roll: 551/667 Receipt No. _____Lot: 2 D.P.: _____ Section: _____ Block: VIIISite of Building: S.D. AraroaStreet: Church StTownship or Rural District: Te AraroaRiding: Borough

OFFICE USE ONLY

Received from: Te Araroa Bor. C1 a Rate C.C.

Authorised Officer

for Building Permit Fee, etc. _____ \$ _____

Building Research Levy _____ \$ 75-00

the sum of (Total) _____ \$ _____ / / 19

Owner - Name: Te Araroa Borough CouncilFull Address: P.O. Box 4 Te AraroaBuilder - Name: J. A. KnowlesFull Address: 1st Ave Wairoa**2. NATURE OF PERMIT (Tick box)**New building including
separate buildings add-
ed to existing complex ☒Repairs, alterations or
extensions to an exist-
ing building ☐Conversion ☐Demolition ☐**3. VALUE AND AREA OF BUILDING**Est. value of building work \$149819.00Est. value of plumbing and
drainage if not included
in permit \$ _____

If valued at more than \$20,000 state:

Est. commencement date _____ Mth. 19

Est. completion date _____ Mth. 19

Building registration No. _____

Total
floor area
(sq ft)

(Sq. metres)

4. DESCRIPTION OF BUILDING OR STRUCTURE AND MAIN PURPOSE FOR WHICH IT WILL BE USED:Erect 5 2 unit "Own Your Own" Flats**Special Conditions:**Property Zoned - Community Use

Permission is hereby granted you to carry out the works as proposed in accordance with the drawings and other documents submitted; such work to be subject at any time during progress to inspection, and to be carried out in strict conformity with the requirements of the council bylaws, and subject to the builder taking full responsibility for any damage done to any works such as telephone cables, power cables, water mains, sewers, pipes, footpaths, roads, or other services.

Stats. - B.C./MP/01

Issuing Officer: 10/5/77

TE AROHA BOROUGH COUNCIL

APPLICATION FOR DRAINAGE AND PLUMBING PERMIT

I/We, the undersigned, hereby make application for permission to have the work described herein, and set out in the plans on the back hereof, and in strict accordance with the "Drainage and Plumbing Regulations", under the Health Act, 1956, carried out in or on the premises —

Owned by L. PACKER of TE AROHA
Premises Situated at No. WHITAKER Street/Avenue.
Lot No. Section No. D.P. No. Valuation No. Block No.

CONDITIONS OF PERMIT:

1. No roof water or any stormwater is allowed to discharge into a sewer. Where possible stormwater from building is to be discharged into the street stormwater channel.
2. All gully trap basins to be built not less than 6 inches in height above the surrounding ground level.

DESCRIPTION OF WORK:

Disposal of sewerage to _____
Signature of _____ Plumber Licensed No. _____
Signature of _____ Drainlayer Licensed No. _____
Estimated Value of Sanitary Plumbing \$ _____ Fee \$ _____ Rec. No. _____
Estimated Value of Drainage \$ _____ Fee \$ _____ Rec. No. _____
Sewer connection _____ Fee \$ _____ Rec. No. _____
Dated this _____ day of _____, 19 _____
Signature _____
Address _____

NOTE:—Schedule of fees and instructions for drawing the drainage plan are on the back of the form.

FOR OFFICE USE ONLY

Plans and specifications approved and issue of permit authorised.

Conditions _____
Permit No. _____
Date _____ Inspector _____