



# Processing PIM / TAR / BC / Amendment Master Checklist

Ref: CP 06  
Ver: 19  
Issued: 06/07/2012  
IT-641173  
Page 1 of 6

|                                     |     |       |                           |           |           |
|-------------------------------------|-----|-------|---------------------------|-----------|-----------|
| CATEGORY                            | RBW | NZSFC | CONTRACTOR                | INSPECTOR | INSPECTOR |
| 1 B II                              | YES |       |                           | Ball      | Greeny    |
| PIM/BC Application No.              |     |       | Valuation No. 0654234900B |           |           |
| Owner: Johnson                      |     |       | Property File No. P05108  |           |           |
| Project Location: 2/10 Taurus Place |     |       |                           |           |           |
| Description of Work: re-roofing     |     |       |                           |           |           |
| PIM Issued:                         |     |       | BC Issued: 5/12/13        |           |           |

## PIM Tracking Record:

| Hazard/Caution/ Information (as noted on file) |                                   |            |           |               |                                      |
|------------------------------------------------|-----------------------------------|------------|-----------|---------------|--------------------------------------|
| Poco Cream - No SUPACE                         |                                   |            |           |               |                                      |
| Processing                                     | Referral Date (Building Services) | Name       | Signature | Date Reviewed | Early Notification or PIM suspension |
| Building Services                              |                                   | B. BESTER  |           | 19/11/13      | Y <input checked="" type="radio"/> N |
| Admin Assistant - Building                     | 19/11/13                          | H Ferguson |           | 22/11/13      | Y <input type="radio"/> N            |
| Resource Engineer                              |                                   |            |           |               | Y <input type="radio"/> N            |
| Development Contributions                      |                                   |            |           |               | Y <input type="radio"/> N            |
| Pollution Control                              |                                   |            |           |               | Y <input type="radio"/> N            |
| Planning                                       |                                   |            |           |               | Y <input type="radio"/> N            |
| Regulatory/Geothermal                          |                                   |            |           |               | Y <input type="radio"/> N            |
| Environmental Health                           |                                   |            |           |               | Y <input type="radio"/> N            |
| Recreation & Community                         |                                   |            |           |               | Y <input type="radio"/> N            |

## BC Tracking Record

|                      | Date Reviewed | Name     | Suspend Consent                      | Approval Signature | Date of Approval |
|----------------------|---------------|----------|--------------------------------------|--------------------|------------------|
| Accessibility Review |               |          | Y <input type="radio"/> N            |                    |                  |
| Building Consent     | 5/12/2013     | E Morris | Y <input checked="" type="radio"/> N |                    | 5.12.2013        |

|                                                                                            |           |   |                          |         |                   |  |
|--------------------------------------------------------------------------------------------|-----------|---|--------------------------|---------|-------------------|--|
| Records sent to applicant and TA. Administration to complete on issue (✓ included or x NA) | Plans     | ✓ | Supporting documentation | ✓       | Section 37 Notice |  |
|                                                                                            | PIM       | x | Building Consent         | ✓       | Section 36 Notice |  |
| Name: H Ferguson                                                                           | Signature |   | Date                     | 5/12/13 |                   |  |



RRD001X3FY

Document Number: RDC-426490

Date Registered: 9/12/2013

Received by Customer Services

15 NOV 2013

Received by Building Services

Date: 19.11.13



# PIM ENDORSEMENTS

|     |    |    |   |    |    |    |    |   |   |   |   |   |     |   |    |   |   |   |   |   |   |   |   |   |   |
|-----|----|----|---|----|----|----|----|---|---|---|---|---|-----|---|----|---|---|---|---|---|---|---|---|---|---|
| 300 | a  | b  | c | d  | e  | g  | h  | i | j | k | l |   | 340 | a | b  | c | d | f |   |   |   |   |   |   |   |
|     | f  |    |   |    |    |    |    |   |   |   |   |   | 342 | a | b  | c | f |   |   |   |   |   |   |   |   |
| 302 | a  | b  | c | d  | e  | g  | h  | i | j | k | l |   | 344 | a | b  | c | d | e | g | h | i | j | k | l | m |
|     | m  | n  | o | p  | q  | r  | s  | t | u | v | w | 1 |     | n | o  | p | q | r | s | t | u | v | w |   | f |
|     | w2 | w3 | x | y  | z  | f  |    |   |   |   |   |   | 346 | a | f  |   |   |   |   |   |   |   |   |   |   |
| 304 | a  | b  | c | f  |    |    |    |   |   |   |   |   | 348 | a | b  | c | d | e | g | h | i | j | k | l | m |
| 306 | a  | b  | c | d  | e  | g  | h  | i | j | k | l |   |     | n | o  | p | q | r | s | t | u | v | w | x | y |
|     | m  | n  | o | f  |    |    |    |   |   |   |   |   |     | z | f  |   |   |   |   |   |   |   |   |   |   |
| 308 | a  | b  | c | d  | e  | f  |    |   |   |   |   |   | 350 | a | b  | c | d | e | g | f |   |   |   |   |   |
| 312 | a  | b  | c | d  | e  | g  | h  | i | j | k | l |   | 352 | a | b  | c | f |   |   |   |   |   |   |   |   |
|     | m  | n  | o | p  | q  | r  | f  |   |   |   |   |   | 354 | a | b  | c | f |   |   |   |   |   |   |   |   |
| 314 | a  | b  | c | c1 | c2 | d  | d1 | e | g | h | i |   | 356 | a | b  | c | d | e | g | h | f |   |   |   |   |
|     | j  | k  | l | m  | f  |    |    |   |   |   |   |   | 358 | a | b  | c | d | f |   |   |   |   |   |   |   |
| 316 | a  | b  | c | c1 | c2 | d  | e  | g | h | i | j |   | 360 | a | b  | c | d | f |   |   |   |   |   |   |   |
|     | k  | f  |   |    |    |    |    |   |   |   |   |   | 362 | a | f  |   |   |   |   |   |   |   |   |   |   |
| 318 | a  | b  | c | d  | e  | g  | h  | i | j | k | f |   | 364 | a | f  |   |   |   |   |   |   |   |   |   |   |
| 320 | a  | b  | c | c1 | c2 | d1 | d2 | e | g | h | i |   | 366 | a | b  | c | d | f |   |   |   |   |   |   |   |
|     | j  | f  |   |    |    |    |    |   |   |   |   |   | 368 | a | b  | f |   |   |   |   |   |   |   |   |   |
| 322 | a  | b  | f |    |    |    |    |   |   |   |   |   | 370 | a | b  | f |   |   |   |   |   |   |   |   |   |
| 324 | a  | b  | c | d  | e  | g  | h  | i | j | k | f |   | 372 | a | b  | f |   |   |   |   |   |   |   |   |   |
| 330 | a  | b  | c | d  | f  |    |    |   |   |   |   |   | 374 | a | b  | f |   |   |   |   |   |   |   |   |   |
| 336 | a  | b  | f |    |    |    |    |   |   |   |   |   | 376 | a | a1 | b | c | d | f |   |   |   |   |   |   |
| 338 | a  | b  | c | d  | e  | g  | h  | i | j | f |   |   |     |   |    |   |   |   |   |   |   |   |   |   |   |

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |   |   |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|---|
| <b>BUILDING SECTION</b> Please record any thing that may be relevant to the processing Building Officer                                                                                                                                                                                                                                                                                                                                                                                                                                                      |   |   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |   |   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |   |   |
| <b>PLANNING SECTION (Section 37 Notice)</b> Please record considerations and reasons for decisions                                                                                                                                                                                                                                                                                                                                                                                                                                                           |   |   |
| Zone                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |   |   |
| Any notified plan changes / proposed Designations relevant? (check RDC web site)                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Y | N |
| Any relevant Planning Land Features that may impact on whether planning consent require.                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Y | N |
| Check all Planning PIM standard statements-(Circle any relevant ) <i>special zoning provisions SP / Scheduled site / Building on uncompleted subdivision / Development / Road widening / Appendix A sites / Service lanes / Special Height controls (airport, Maori Villages) / Airport noise / height issues / reserve contribution required for permitted activity / Hazardous substances / Contamination etc</i>                                                                                                                                          |   |   |
| Proposal may affect Marae (can be on an adjacent site) (Liaise with Director Kaupapa Maori)                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |   |   |
| Outcome.....                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |   |   |
| The proposal requires resource consent or other planning consent (early notification if yes)                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Y | N |
| No resource consent or other planning consent is required for the proposal <ul style="list-style-type: none"> <li>The proposal is a permitted activity and enough info is provided to demonstrate all relevant performance standards are met, site plan sighted, height and day lighting planes checked, all required parking and turning, reserve contribution needs to be picked up for permitted activities etc</li> <li>Existing use rights apply (why).....</li> <li>Proposal in accordance with designation.....</li> <li>Other reason.....</li> </ul> |   |   |



The proposal requires resource consent under Rule / s..... of the Operative District Plan (note the rules and reasons why consent required)

Resource consent has been applied for on..... The consent number is.....

The planner processing the application is .....

The proposal is in accordance with Resource Consent numbered RC..... Which was granted on .....

Please ensure you are familiar with any consent conditions and ensure all are complied with.

The proposal is not in accordance with Resource Consent numbered RC..... Provide details of conditions not met and info required. (early notification)

Y N

The proposal requires outline plan approval as the site is designated for the purpose of .....  
There is insufficient information with the application to determine whether resource consent is required or otherwise. The following information is required. (early notification)

The proposal may affect an historic place (let Building know ASAP for section 39 notification) The site is listed in Appendix A of the District Plan. Number..... The site is registered NZHPT, site.....

Y N

#### Free Text

#### Further Information Reviewed (record what was supplied, how compliance demonstrated and outcome)

Name

Signature

Date



**RESOURCE ENGINEER** Please record considerations and reasons for decisions

**Further Information Reviewed** (record what was supplied, how compliance demonstrated and outcome)

Name

Signature

Date

**ENGINEERING POLLUTION CONTROL** Please record considerations and reasons for decisions

Circle

Grease trap required

Y

N

**Further Information Reviewed** (record what was supplied, how compliance demonstrated and outcome)

Name

Signature

Date

**ENGINEERING (Development Contribution Notice)** Please record considerations and reasons for decisions

Circle

Development contribution applies (early notification)

Y

N

Copy of Development contribution notice attached (early notification)

Y

N

**GEO THERMAL** Please record considerations and reasons for decisions

**ENVIRONMENTAL HEALTH** Please record considerations and reasons for decisions

Officers will contact the applicant to complete Health application and information booklet

Y

N



**RECREATION AND COMMUNITY** Please record considerations and reasons for decisions

The applicant requires the approval of the Parks and Recreational Manager to carry out works proposed in the vicinity of Council vegetation.

Y

N

The applicant requires the approval of the Parks and Recreational Manager to shift / replace Council vegetation that will be effected by the proposal. The applicant shall pay / carry out compensation / remedial work as instructed

Y

N

**Building Consent Processing Section:****Building Consent Endorsements / Conditions:****Conditions:****Inspections:**

400 see over page

**Additional BA Conditions****Important Endorsements**

|     |   |   |     |   |   |    |    |    |    |   |   |   |   |   |
|-----|---|---|-----|---|---|----|----|----|----|---|---|---|---|---|
| 401 | a | b | 402 | a | b | c  | d  | e  | g  | h | i | j | k | l |
| C   | d | f |     | m | n | o1 | o2 | oa | ob | p | q | r | s | t |
|     |   |   |     | u | v | w  | x  | y  | f  |   |   |   |   |   |

**Compliance Schedule SS and CS systems**

|        |        |        |        |        |        |      |        |        |        |        |  |  |  |  |
|--------|--------|--------|--------|--------|--------|------|--------|--------|--------|--------|--|--|--|--|
| 403    | a      | (b)    | c      | d      | f      |      |        |        |        |        |  |  |  |  |
|        | ss1    | ss2    | ss3/1  | ss3/2  | ss3/3  | ss4  | ss5    | ss6    | ss7    | ss8/1  |  |  |  |  |
| ss8/2  | ss8/3  | ss9/1  | ss9/2  | ss10   | ss11   | ss12 | ss13/1 | ss13/2 | ss13/3 | ss14/1 |  |  |  |  |
| ss14/2 | ss15/1 | ss15/2 | ss15/3 | ss15/4 | ss15/5 | ss16 |        |        |        |        |  |  |  |  |
| cs1    | cs2    | cs3    | cs4    | cs5    | cs6    | cs7  | cs8/1  | cs8/2  | cs8/3  | cs9    |  |  |  |  |
| cs10   | cs11   | cs12   | cs13   | cs14   | cs15   | cs16 |        |        | (13)   |        |  |  |  |  |

**Attachments****Restricted Building Work**

|     |   |   |   |   |   |     |     |     |     |     |     |     |   |
|-----|---|---|---|---|---|-----|-----|-----|-----|-----|-----|-----|---|
| 404 | a | b | c | d | f | 405 | rbw | car | bri | roo | ext | fou | f |
|-----|---|---|---|---|---|-----|-----|-----|-----|-----|-----|-----|---|

**FREE TEXT:**

402: f) PS3 required to verify the purlin fixing from the contractor.



# **Site Inspection Calculation / Conditions and Fees Sheet**

| PROCESSING                                                                                                                  | TIME ALLOCATED                                                     | TIME TAKEN (Quantity) | TOTALS in Dollars        |                              |
|-----------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------|-----------------------|--------------------------|------------------------------|
| Processing Hrs INSPECTOR                                                                                                    | 1.30                                                               | 30 x 1.70             | 85.00                    |                              |
| Processing Fees Paid                                                                                                        |                                                                    |                       | 85.00 cr.                |                              |
| <b>SUB TOTAL</b>                                                                                                            |                                                                    |                       | 0.00                     |                              |
| Further information                                                                                                         |                                                                    |                       | —                        |                              |
| <b>TOTAL PROCESSING COST</b>                                                                                                |                                                                    |                       | 0.00                     |                              |
| <b>400 INSPECTIONS (Circle correct letter)</b>                                                                              | <b>Guide Only – Dependent On Complexity &amp; Size Of Project.</b> |                       | <b>No of Inspections</b> | <b>No of ¼ HR Increments</b> |
| a. Siting, Footings, Foundations                                                                                            | 3                                                                  | 0.75                  |                          |                              |
| a. Retaining Walls                                                                                                          | 2/3                                                                | 0.5 – 0.75            |                          |                              |
| b. Subfloor Bracing & Fixing                                                                                                | 2                                                                  | 0.5                   |                          |                              |
| c. Pre-floor P&D                                                                                                            | 2                                                                  | 0.5                   |                          |                              |
| d. Concrete Floor Building                                                                                                  | 2                                                                  | 0.5                   |                          |                              |
| e. Pre-Wrap <200-<300->etc (30mins ≥ high)                                                                                  | 3                                                                  | 0.75–1.0–1.25         |                          |                              |
| g. Wrap Only                                                                                                                | 2                                                                  | 0.5                   |                          |                              |
| g. Wrap/Cavity Battens                                                                                                      | 3                                                                  | 0.75                  |                          |                              |
| h. ½ High Brick                                                                                                             | 2                                                                  | 0.5                   |                          |                              |
| i. Bond Beams (One Block- full basement)                                                                                    | 2                                                                  | 0.5 – 0.75            |                          |                              |
| j. Precast Concrete Work                                                                                                    | 2                                                                  | 0.5                   |                          |                              |
| k. Pre Plaster                                                                                                              | 3                                                                  | 0.75                  |                          |                              |
| l. Solar water heater                                                                                                       | 2                                                                  | 0.50                  |                          |                              |
| m. Preline Building                                                                                                         | 3                                                                  | 0.75                  |                          |                              |
| n. Preline P&D                                                                                                              | 2                                                                  | 0.5                   |                          |                              |
| o. Wet Areas/Tanking/Basements                                                                                              | 2                                                                  | 0.5                   |                          |                              |
| p. Postline (Addition – New Dwelling)                                                                                       | 2                                                                  | 0.5 – 0.75            |                          |                              |
| q. Sanitary & Stormwater Drainage (Alteration / New Conn – New Dwelling)                                                    | 2                                                                  | 0.5 – 0.75            |                          |                              |
| r. Enclosed Decks – membrane roofs/gutters                                                                                  | 2                                                                  | 0.5                   |                          |                              |
| s. Disconnection drainage                                                                                                   | 2                                                                  | 0.5                   |                          |                              |
| t. Swimming Pools (Pool fencing)                                                                                            | 2                                                                  | 0.5                   |                          |                              |
| u.a. Solid Fuel Heater                                                                                                      | 2                                                                  | 0.5                   |                          |                              |
| u.b In Built Solid Fuel Heater                                                                                              |                                                                    |                       |                          |                              |
| v. Final Inspection (add time for paper work for minor consents ¼ hr )                                                      | 4/5                                                                | 1.0-1.25              | 1                        | 3                            |
| w Combined inspections                                                                                                      | Complete free text on sheet 5                                      |                       |                          |                              |
| x Trade waste                                                                                                               |                                                                    |                       |                          | NC                           |
| f Free text                                                                                                                 | Complete free text on sheet 5                                      |                       |                          |                              |
| <b>Building officer desk top review</b> (allow 5 min each allocated inspection, dwellings/ commercial only)                 | 1                                                                  | 3                     |                          | 118.                         |
| <b>CCC Assessment</b> (not required for garages, carports and minor works)                                                  |                                                                    |                       |                          |                              |
| <b>LBP Process</b> (allow 15 min / LBP Class)                                                                               |                                                                    |                       |                          |                              |
| Other                                                                                                                       |                                                                    |                       |                          |                              |
| <b>TOTAL NUMBER OF INSPECTIONS</b>                                                                                          |                                                                    |                       |                          | 118.                         |
| Plus Travel credit Paid                                                                                                     |                                                                    |                       |                          | 118                          |
| <b>TOTAL INSPECTION COST</b>                                                                                                |                                                                    |                       |                          | 0.00                         |
| <b>RECORD NUMBER AND TOTAL TIME ALLOWANCE FOR INSPECTIONS AND BUILDING CATEGORY ON SITE SUMMARY SHEET (Circle to right)</b> |                                                                    |                       |                          | <b>Completed</b>             |



|                                                                                   |                                                                                                                                               |                    |
|-----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------|--------------------|
|  | <h2 style="margin: 0;">Re-Roof Processing and Vetting Checklist</h2> <p style="margin: 0;"><i>For initial completion by the applicant</i></p> | Ref: CPV 07        |
|                                                                                   |                                                                                                                                               | Ver: 06            |
|                                                                                   |                                                                                                                                               | Issued 21 Dec 2012 |
|                                                                                   |                                                                                                                                               | RDC-144307         |
|                                                                                   |                                                                                                                                               | Page 1 of 2        |

| Copies Rqd | ADMINISTRATION CHECKLIST<br><i>To be completed by Customer Service Centre</i>              | Complete ✓ |
|------------|--------------------------------------------------------------------------------------------|------------|
| 2          | Geyserview printout (contour plan) checked with Applicant for Correctness                  |            |
| 1          | Green PIM/BC Master cover has been completed                                               |            |
| 1          | Site Inspection Card completed                                                             |            |
| 1          | Applicant Inspection card complete                                                         |            |
| 1          | Form 6 (Application for Code Compliance Certificate) attached to Applicant Inspection Card |            |
|            | Form 2 administratively complete and front cover signed appropriately                      |            |

**Lodgment category cost for building consent is 4A with an additional inspection of ½ hour**

**Applicant**

S = Supplied

N/A = Not Applicable

Please arrange an vetting appointment through customer services should you wish to lodge this application in person (2 copies of plans and any relevant specifications to be supplied with application)

Building Consent No. 71873

Processor Name: E Morris

|           |                                                                                                                                                                                                                                                                                                                                                                                                                      |   |     |          |   |     |
|-----------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|-----|----------|---|-----|
| Form 2    | Building Consent Application Form completed and signed                                                                                                                                                                                                                                                                                                                                                               | S | N/A | <u>P</u> | F | N/A |
|           | Roofing is defined as "restricted building work". The design must be completed out by a Licensed Designer?                                                                                                                                                                                                                                                                                                           | Y | N   | <u>P</u> | F | N/A |
|           | As this project is defined as "restricted building work" a Form 2A (Certificate of Design Work) must be provided.                                                                                                                                                                                                                                                                                                    | Y | N   | <u>P</u> | F | N/A |
|           | Have all Licensed Building Practitioner's been identified?                                                                                                                                                                                                                                                                                                                                                           | Y | N   | <u>P</u> | F | N/A |
| Site Plan | House plans or Geyser View plan can be used to meet this requirement, request representative from Customer Services to print 2 copies.<br><i>(indicate area of re-roof on this plan)</i>                                                                                                                                                                                                                             | S | N/A | <u>P</u> | F | N/A |
|           | Owner / Address match Form 2?                                                                                                                                                                                                                                                                                                                                                                                        |   |     |          |   |     |
| 1         | Detail what type of roofing material exists<br><u>Decromastic tile</u>                                                                                                                                                                                                                                                                                                                                               | S | N/A | <u>P</u> | F | N/A |
| 2         | Details of the new of roofing material that is to be used<br><ul style="list-style-type: none"> <li>o Tiles (concrete, metal)</li> <li>o Membrane</li> <li>o Iron (color steel, alloy, zincalume, galvanized) <u>cls longrun corr</u></li> <li>o underlay <u>Thermakraft 215 self support</u></li> </ul>                                                                                                             | S | N/A | <u>P</u> | F | N/A |
| 3         | Roof pitch <u>15°</u>                                                                                                                                                                                                                                                                                                                                                                                                | S | N/A | <u>P</u> | F | N/A |
| 4         | Provide details of any new framing members<br><ul style="list-style-type: none"> <li>o Purlin/batten <u>75 X 50</u> spanning <u>900</u> mm</li> <li>o Rafter <u>    </u> X <u>    </u> spanning <u>    </u> mm</li> <li>o Substrate</li> <li>o Fixings <u>304 10-gauge screws &amp; Purlins</u></li> <li>o Other structural members</li> <li>o Treatment of any new members <u>398 H1-2</u></li> </ul>               | S | N/A | <u>P</u> | F | N/A |
| 5         | Provide flashing details that meet the roofing manufacturers requirements<br><ul style="list-style-type: none"> <li>o Ridges</li> <li>o Valleys</li> <li>o Barge</li> <li>o up stand</li> <li>o Dormer junctions</li> <li>o Stop ends – kick outs</li> <li>o Apron</li> <li>o Under flashing to low pitch roofs</li> <li>o Change in pitch flashing</li> <li>o Parapets or handrail junctions or capping.</li> </ul> | S | N/A | <u>P</u> | F | N/A |

*Also where new Roof Cladding meets old  
Decro tile w flat 2.*



|                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |   |     |          |          |            |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---|-----|----------|----------|------------|
| 6                                                                                                                                                                           | Wind fixings<br>(change of roofing product may result in the need to upgrade up lift fixings specifically where a heavy weight roof is replaced by a light weight product)<br><br>Please circle appropriate site specific wind loading:<br>Low <u>Medium</u> High Very High Specific Engineer Design                                                                                                                                                                      | S | N/A | <u>P</u> | F        | N/A        |
| 7                                                                                                                                                                           | Bracing to meet NZS 3604 / NZS 1170 D<br>(change of roofing product may result in the need to increase existing bracing) <i>Existing Hip is the Brace. no change or upgrade required.</i><br>Detail both existing braces and the proposed (where the bracing is unknown provide new bracing to comply with the relevant building standard)<br>Space, Plane, hip and valley or Gable end wall                                                                              | S | N/A | <u>P</u> | F        | N/A        |
| 8                                                                                                                                                                           | Penetrations through roofing material<br><ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Terminal vents <i>DeKtites.</i></li> <li><input type="checkbox"/> Chimneys</li> <li><input type="checkbox"/> Skylights</li> <li><input type="checkbox"/> Solar panels (water pipes)</li> </ul>                                                                                                                                                        | S | N/A | <u>P</u> | F        | N/A        |
| 9                                                                                                                                                                           | Gutters (are there to be any change to existing gutters or downpipes that are not a direct replacement? Moving location or number of downpipes?)<br><ul style="list-style-type: none"> <li><input type="checkbox"/> Gutter type</li> <li><input type="checkbox"/> Over flows</li> <li><input type="checkbox"/> Rainwater heads</li> <li><input type="checkbox"/> Downpipes</li> <li><input type="checkbox"/> Drains to soak hole</li> </ul> <i>NO CHANGE TO THIS AREA</i> | S | N/A | P        | F        | <u>N/A</u> |
| 10                                                                                                                                                                          | Ventilation to roof/ceiling space (Membrane, enclosed or skillion roofs)                                                                                                                                                                                                                                                                                                                                                                                                  | S | N/A | P        | F        | <u>N/A</u> |
| 11                                                                                                                                                                          | Any fire rating issues that need to be addressed<br>e.g. eaves closer than 650mm to boundary<br>clear light roofing no closer than 1.0m to boundary etc                                                                                                                                                                                                                                                                                                                   | S | N/A | P        | F        | <u>N/A</u> |
| 12                                                                                                                                                                          | Domestic smoke alarm(s) detailed on floor plan (Refer to NZBC F7 for requirements within 3m of sleeping areas and on escape route of each level)<br><i>NOTED ON PLANS.</i>                                                                                                                                                                                                                                                                                                | S | N/A | <u>P</u> | F        | N/A        |
| <b>Additional Fees</b>                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |   |     |          |          |            |
| Please be aware that additional fees may be applied after lodgment deposit is paid, for inspections, processing, certificates, government levies and the like (discussed?). |                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |   |     | Y        | <u>N</u> | Mail       |

**RDC use only**

P = Pass

F = Non-compliance with the Building Code – further information required

N/A= Not Applicable

RDC staff to record reasons for decisions in question text box

|                                                                                                                           |
|---------------------------------------------------------------------------------------------------------------------------|
| <b>Other considerations</b> (waivers and modifications- alternative solutions, TL authors- - section 75, fire rating etc) |
|                                                                                                                           |

**GRANTING BUILDING CONSENT**

Sign the application form to grant the building consent once satisfied on reasonable grounds that if the building work was to be constructed in accordance with the approved documents, then compliance with the Building Code will be met.



05 DEC 2013



METAL LINE ROOFING LIMITED  
T/A METALCRAFT ROOFING  
PO BOX 388  
ROTORUA 3040

Rotorua District Council  
1061 Haupapa Street  
Private Bag 3029  
Rotorua Mail Centre  
Rotorua 3046  
New Zealand  
P: 07 348 4199  
F: 07 346 3143  
E: [mail@rdc.govt.nz](mailto:mail@rdc.govt.nz)  
W: [www.rdc.govt.nz](http://www.rdc.govt.nz)

File Ref: P05108  
Building Consent No: 71873

Dear Sir/Madam,

**BUILDING CONSENT**

**Address of Project: 2/10 TAURUS PLACE**

Please find enclosed your Building Consent and its relevant Plans and Specifications. You should take time to read the Conditions that are attached to your Building Consent and Plans, including the stamps on those plans.

You should also be aware that in some instances although you have received your Building Consent, there may still be outstanding issues regarding land use, etc. You will need to finalise these before you undertake any building work.

However, if you have received your Resource Consent (if required), your Project Information Memorandum and have satisfied all the Conditions set out in those documents, you are free to start your building work.

Remember, you need to arrange for all the inspections that have been estimated and are listed as Conditions to your Building Consent. When requesting an inspection a minimum of 24 hours notice should be given. Remember also that you or your agent/builder, etc, needs to attend and/or be on site for any inspection.

To avoid potential delays on site and help you understand what Council will be inspecting it is suggested you reference the suite of inspection checklists that are available on Council's web site.

Please note Council's Valuers (Landmass Technology Ltd) may also carry out an inspection.

**"Please remember also to quote your Building Consent No. 71873 when making any inspection bookings." The direct dial number for inspections is 3495646.**

We wish you well with your project and look forward to working alongside you to achieve a satisfactory completion of your project.

Please feel free to phone Council's Building Services should you require further information.

Yours faithfully

D. Holder  
Building Services Manager





**Building Consent No: 71873**

Section 51, Building Act 2004

Issued: 05 Dec 2013

Rotorua District Council  
1061 Haupapa Street  
Private Bag 3029  
Rotorua Mail Centre  
Rotorua 3046  
New Zealand  
P: 07 348 4199  
F: 07 346 3143  
E: mail@rdc.govt.nz  
W: www.rdc.govt.nz

**Agent**

METAL LINE ROOFING LIMITED  
T/A METALCRAFT ROOFING  
PO BOX 388  
ROTORUA 3040

**Owner**

JOHNSON, TESSA MARIE  
10B TAURUS PLACE  
KAWAHA POINT  
ROTORUA 3010

**The Building**

**Property ID:** P05108  
**Street Address:** 2/10 TAURUS PLACE  
**Valuation number:** 06542 349 00 B  
**Legal Description:** FLAT 2 DPS29163

First point of contact for communications with council building consent authority:  
RDC Building Services – Direct Dial 349 5646

**Building Work**

The following building work is authorised by this consent:

**Project is for:** RE-ROOF DECRO TILE TO CORRUGATE LONG RUN TO 10B ONLY  
**Intended Use:** DWELLING (DETACHED)  
**Intended Life:** Indefinite but not less than 50 years

This building consent is issued under section 51 of the Building Act 2004. This building consent does not relieve the owner of the building (or proposed building) of any duty or responsibility under any other Act relating to or affecting the building (or proposed building).

This building consent also does not permit the construction, alteration, demolition, or removal of the building (or proposed building) if that construction, alteration, demolition, or removal would be in breach of any other Act.

**This Building Consent Is Subject To The Following Conditions:**

**Inspections By Building Consent Authority (Phone Building Services 3495646 To Book Inspections)**

Final Inspection when all building work is complete

**Important Endorsements**

Section 52 Building Act 2004 (Lapse of Building Consent)

A Building Consent lapses and is of no effect if the building work to which it relates does not commence within 12 months of the date of issue unless prior arrangements are made with the Building Consent Authority.

**Roof Certification**

A certification statement is to be provided by the roofing contractor confirming compliance with building code/manufacture's specifications on completion of the roof including any purlins or batten fixings completed.



#### Completion Of Work

At completion of work authorised by this consent the Building Act requires you to apply for a Code of Compliance Certificate (use Form 6) as soon as practicable after the Building work is completed.

\*\*\* A PS3 is required from the contractor to verify the purlin fixing.

#### Compliance Schedule

A Compliance Schedule is not required for the building

#### **RESTRICTED BUILDING WORK**

This project includes restricted building work. It is the owners responsibility to notify the Building Consent Authority in writing before any restricted building work commences;

- The name of every licensed building practitioner who is engaged to carry out or supervise the restricted building work under the building consent where this information has not been stated in the building consent application; or
- Where a Licensed Building Practitioner ceases to be engaged to carry out or supervise restricted building work under the building consent; or
- Another licensed building practitioner is engaged to carry out or supervise the restricted building work.

The following restricted building work is included in this consented project and the Licensed Building Practitioner responsible for carrying out or supervising the restricted building work must on completion of the restricted building work provide the owner and Territorial Authority with a memorandum (record of building work) Form 6A (this form contains a list of individual components / systems that are the responsibility of the Licensed Building Practitioners for each of the following licence classes).

Where the owner intends to undertake restricted building work a formal declaration and notice using Forms 2B and 2C must be provided prior to commencement of restricted building work.

Carpentry (primary structure, external moisture management system)  
Roofing (external moisture management system)

#### ADDITIONAL FEES:

During consent processing Council estimates the number, type and grouping of inspections required to complete a project.

Should additional inspections be required to confirm compliance with the approved Building Consent/Building Code, Council reserves the right to seek payment for these prior to the issue of Code Compliance Certificate.

Processing of As-built plans received may also attract a fee payable prior to the issue of Code Compliance Certificate.

Signed for and on behalf of the Council:

Name: Helen Ferguson

Position: Building Services Administration.

Signed: \_\_\_\_\_



Date: 05 DEC 2013





# Form 2 APPLICATION FOR PROJECT INFORMATION MEMORANDUM AND/OR BUILDING CONSENT Section 33 or 45, Building Act 2004

| 1. THE BUILDING [if item is not applicable put N/A in the space]                     |                       | OFFICE USE ONLY:                                                                              |
|--------------------------------------------------------------------------------------|-----------------------|-----------------------------------------------------------------------------------------------|
| Street address of building: <u>10, b. Taurus Place - 71873</u><br><u>Rotorua</u>     |                       | File No. <u>P05108</u>                                                                        |
| [If no street address – details of nearest intersection] _____                       |                       | Consent/PIM Number: _____                                                                     |
| Legal description of land where building is located:                                 | Lot _____ DP _____    | Compliance Schedule No. _____                                                                 |
| Site area: _____ m <sup>2</sup>                                                      | Sec _____ Block _____ | Date received: <u>15 NOV 2013</u>                                                             |
| Building name: _____                                                                 | Valuation No: _____   | Vetted: <u>DAVID L</u>                                                                        |
| Location of building within site/block number: [Include nearest street access] _____ |                       | Complete/Incomplete/Exempt: _____                                                             |
| Number of levels: [Above & below ground] _____ Level/Unit No: _____                  |                       | Name: <u>DAVID L</u>                                                                          |
| Floor area: _____ (sq m) [Indicate area affected by the building work]               |                       | Date: <u>15/11/13</u>                                                                         |
| Current, lawfully established, use: <u>Home</u> Year First Constructed: _____        |                       | Signature: _____                                                                              |
| [Add no. of occupants per level and per use if more than 1] _____                    |                       | Restricted Building Work? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> |

| 2. OWNER                                                                                                                       | 3. AGENT [Only required if application is being made on behalf of the owner] |
|--------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|
| Name of Owner: <u>MRS Tessa Johnson</u>                                                                                        | Name of Agent: <u>Metalline Roofing LTD</u>                                  |
| Contact person: _____                                                                                                          | Contact person: <u>David Smith</u>                                           |
| Mailing address: <u>10b Taurus Place</u><br><u>Rotorua</u>                                                                     | Mailing address: <u>P.O Box 388</u>                                          |
| Street address/registered office: _____                                                                                        | Street address/registered office: <u>15 Monokia St</u><br><u>Rotorua</u>     |
| Phone No: _____ Landline: <u>343 7807</u>                                                                                      | Phone No: _____ Landline: <u>350 1138</u>                                    |
| Mobile: _____ Daytime: _____                                                                                                   | Mobile: <u>027 286 3761</u> Daytime: _____                                   |
| After hours: _____ Facsimile: _____                                                                                            | After hours: _____ Facsimile: _____                                          |
| Email: _____                                                                                                                   | Email: _____                                                                 |
| Website: _____                                                                                                                 | Website: _____                                                               |
| Relationship to owner: [State details of the authorisation from the owner to make the application on the owner's behalf] _____ |                                                                              |
| THE FOLLOWING EVIDENCE OF OWNERSHIP IS ATTACHED:                                                                               |                                                                              |
| <input type="checkbox"/> Certificate of Title                                                                                  | <input type="checkbox"/> Lease Agreement                                     |
| <input type="checkbox"/> Agreement for Sale and Purchase                                                                       | <input type="checkbox"/> Other document                                      |

**FIRST POINT OF CONTACT** for communications with the Council / Building Consent Authority: ☐ Owner ☒ Agent

Or: (if different to above details) Name: \_\_\_\_\_ Email: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Phone: \_\_\_\_\_ Facsimile: \_\_\_\_\_

To be completed in lieu of Authorisation Letter

I, Tessa Johnson as the owner of the above property, authorise Metalline Roofing to act as my agent.

Signature T Johnson Date 15.11.2013



#### 4. APPLICATION (Tick if applicable)

I request that you issue a (for the building work described in this application)

- ☐ Project Information Memorandum (PIM)  
☐ Project Information Memorandum (PIM) and Building Consent  
☒ Building Consent The existing PIM No [if applicable] is: \_\_\_\_\_  
☐ Amendment to an existing Building Consent. The existing BC No is: \_\_\_\_\_

State the reference number if this application involves a National Multiple Use Approval: \_\_\_\_\_

Name: D. Smith Signature: D. Smith Date: 15.11.13

If you do not want information contained in this application to be made available for purposes of marketing please tick the box ☐

The signature is that of the ☐ Owner OR the ☐ Agent on behalf of and with the approval of the Owner

#### 5. THE PROJECT

DESCRIPTION OF BUILDING WORK: (Provide sufficient information below to enable scope of work to be fully understood)

Re roofing Decro tile to corrugate long run  
Flat 1 only

Current use of building: Home [e.g. home, implement shed, office]

Will the building work result in a change of use of the building? ☐ Yes ☒ No If Yes, provide details of the new use of the building:

Intended life of the building if less than 50 years: \_\_\_\_\_ [Years]

List Building Consents previously issued for this project (if any): \_\_\_\_\_

Estimated value of the building work on which the building levy will be calculated (including goods and services tax):

\$ 9533.50 [State estimated value as defined in section 7 of the Building Act 2004]

#### 6. RESTRICTED BUILDING WORK [residential building work affecting structure or weather tightness] OR CONTACTS

Will the building work include any restricted work? ☐ Yes ☐ No

If Yes, provide the following details of all licensed building practitioners who will be involved in carrying out or supervising the restricted building work (If these details are unknown at the time of the application, they must be supplied before the building work begins):

Note: Continue on another page if necessary

DESIGNER: Absolute Design  
Name: Margaretha McLaughlin  
Address: 31 A Rutland St Rotarua  
Email: \_\_\_\_\_  
Telephone: 3491635 LBP No: BP100139  
License Class: DESIGN 2

ENGINEER:  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Email: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Reg No: \_\_\_\_\_  
License Class: DESIGN

BUILDER:  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Email: \_\_\_\_\_  
Telephone: \_\_\_\_\_ LBP No: \_\_\_\_\_  
License Class: CARPENTRY

BRICK / BLOCK LAYER:  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Email: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Reg No: \_\_\_\_\_  
License Class: BLOCKLAYING



|                                                                                                                                                                                                                             |                                                                                                                                                     |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>ROOFER:</b><br>Name: <u>Greg Sheffield</u><br>Address: <u>15 Monokia St Rotorua</u><br>Email: _____<br>Telephone: <u>3501138</u> Reg No: <u>BP 110839</u><br>License Class: ROOFING or <del>CARPENTRY</del> (delete one) | <b>EXTERNAL PLASTERER:</b><br>Name: _____<br>Address: _____<br>Email: _____<br>Telephone: _____ Reg No: _____<br>License Class: EXTERNAL PLASTERING |
| <b>FOUNDATIONS / FLOORS:</b><br>Name: _____<br>Address: _____<br>Email: _____<br>Telephone: _____ Reg No: _____<br>License Class: FOUNDATIONS or CARPENTRY (delete one)                                                     | <b>GAS FITTER:</b><br>Name: _____<br>Address: _____<br>Email: _____<br>Telephone: _____ Reg No: _____                                               |
| <b>PLUMBER:</b><br>Name: _____<br>Address: _____<br>Email: _____<br>Telephone: _____ Reg No: _____                                                                                                                          | <b>DRAIN LAYER:</b><br>Name: _____<br>Address: _____<br>Email: _____<br>Telephone: _____ Reg No: _____                                              |
| <b>LICENSED BUILDING PRACTITIONER:</b><br>Name: _____<br>Address: _____<br>Email: _____<br>Telephone: _____ Reg No: _____<br>License Class: _____                                                                           | <b>LICENSED BUILDING PRACTITIONER:</b><br>Name: _____<br>Address: _____<br>Email: _____<br>Telephone: _____ Reg No: _____<br>License Class: _____   |

#### 7. PROJECT INFORMATION MEMORANDUM [Do not fill in this section if the application is for a building consent only]

The following matters are involved in the project: [Tick the matters relevant to the project]

- ☐ Subdivision
- ☐ Alterations to land contours [e.g. digging out the site for a building platform]
- ☐ New or altered connections to public utilities [e.g. Council sewer, stormwater or water mains]
- ☐ New or altered locations and/or external dimensions of buildings
- ☐ New or altered access for vehicles
- ☐ Building work over or adjacent to any road or public place
- ☐ Disposal of stormwater and wastewater
- ☐ Building work over any existing drains or sewers or in close proximity to wells or water mains
- ☐ Other matters known to the applicant that may require authorisations from the Territorial Authority: [Specify]

The following plans and specifications are attached to this application:

\_\_\_\_\_

\_\_\_\_\_



| Building Code Clause<br><i>Tick relevant clauses</i>                                            | Acceptable Solution &<br>NZS 4121<br>Accessible Design                                                                                                                                                                                                           | Verification Method                                               | Alternative Solution<br>[Supporting documents listed below] | Waiver/Modification<br>[Supporting documents listed below] | Proposed Inspections                                                                                                                |
|-------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------|-------------------------------------------------------------|------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> B1 Structure                                                | <input type="checkbox"/> AS1NZS1170<br><input type="checkbox"/> B1/AS1 <input checked="" type="checkbox"/> NZS3604<br><input type="checkbox"/> NZS4229 <input type="checkbox"/> Other                                                                            | <input type="checkbox"/> B1/VM1<br><input type="checkbox"/> Other | <input type="checkbox"/>                                    | <input type="checkbox"/>                                   | <input checked="" type="checkbox"/> Council<br><input type="checkbox"/> Engineer<br><input type="checkbox"/> Other (Specify): _____ |
| <input checked="" type="checkbox"/> B2 Durability                                               | <input checked="" type="checkbox"/> B2/AS1                                                                                                                                                                                                                       | <input type="checkbox"/> B2/VM1                                   | <input type="checkbox"/>                                    | <input type="checkbox"/>                                   | <input checked="" type="checkbox"/> Council<br><input type="checkbox"/> Engineer<br><input type="checkbox"/> Other (Specify): _____ |
| <input type="checkbox"/> C1-4 Fire Clauses<br><input type="checkbox"/> C1-6 Fire Safety Clauses | <input type="checkbox"/> C/AS1 <input type="checkbox"/> C/AS2<br><input type="checkbox"/> C/AS3 <input type="checkbox"/> C/AS4<br><input type="checkbox"/> C/AS5 <input type="checkbox"/> C/AS6<br><input type="checkbox"/> C/AS7 <input type="checkbox"/> C/VM1 | <input type="checkbox"/> C/VM1<br><input type="checkbox"/> C/VM2  | <input type="checkbox"/>                                    | <input type="checkbox"/>                                   | <input type="checkbox"/> Council<br><input type="checkbox"/> Engineer<br><input type="checkbox"/> Other (Specify): _____            |
| <input type="checkbox"/> D1 Access routes                                                       | <input type="checkbox"/> D1/AS1 <input type="checkbox"/> NZS 4121                                                                                                                                                                                                |                                                                   | <input type="checkbox"/>                                    | <input type="checkbox"/>                                   | <input type="checkbox"/> Council<br><input type="checkbox"/> Engineer<br><input type="checkbox"/> Other (Specify): _____            |
| <input type="checkbox"/> D2 Mechanical installation for access                                  | <input type="checkbox"/> D2/AS1 <input type="checkbox"/> D2/AS2<br><input type="checkbox"/> D2/AS3 <input type="checkbox"/> NZS 4121                                                                                                                             |                                                                   | <input type="checkbox"/>                                    | <input type="checkbox"/>                                   | <input type="checkbox"/> Engineer<br><input type="checkbox"/> Other (Specify): _____                                                |
| <input checked="" type="checkbox"/> E1 Surface water                                            | <input checked="" type="checkbox"/> E1/AS1 <input type="checkbox"/> AS3500                                                                                                                                                                                       | <input type="checkbox"/> E1/VM1                                   | <input type="checkbox"/>                                    | <input type="checkbox"/>                                   | <input checked="" type="checkbox"/> Council<br><input type="checkbox"/> Other (Specify): _____                                      |
| <input checked="" type="checkbox"/> E2 External moisture                                        | <input checked="" type="checkbox"/> E2/AS1 <input type="checkbox"/> E2/AS2<br><input type="checkbox"/> SED <input type="checkbox"/> E2/AS3                                                                                                                       | <input type="checkbox"/> E2/VM1                                   | <input type="checkbox"/>                                    | <input type="checkbox"/>                                   | <input checked="" type="checkbox"/> Council<br><input type="checkbox"/> Other (Specify): _____                                      |
| <input type="checkbox"/> E3 Internal moisture                                                   | <input type="checkbox"/> E3/AS1 <input type="checkbox"/> Other                                                                                                                                                                                                   |                                                                   | <input type="checkbox"/>                                    | <input type="checkbox"/>                                   | <input type="checkbox"/> Council<br><input type="checkbox"/> Other (Specify): _____                                                 |
| <input type="checkbox"/> F1 Hazardous agents on site                                            | <input type="checkbox"/> F1/AS1                                                                                                                                                                                                                                  | <input type="checkbox"/> F1/VM1                                   | <input type="checkbox"/>                                    | <input type="checkbox"/>                                   | <input type="checkbox"/> Council<br><input type="checkbox"/> Other (Specify): _____                                                 |
| <input type="checkbox"/> F2 Hazardous building materials                                        | <input type="checkbox"/> F2/AS1                                                                                                                                                                                                                                  |                                                                   | <input type="checkbox"/>                                    | <input type="checkbox"/>                                   | <input type="checkbox"/> Council<br><input type="checkbox"/> Other (Specify): _____                                                 |
| <input type="checkbox"/> F3 Hazardous substances and processes                                  | <input type="checkbox"/> F3/AS1                                                                                                                                                                                                                                  | <input type="checkbox"/> F3/VM1                                   | <input type="checkbox"/>                                    | <input type="checkbox"/>                                   | <input type="checkbox"/> Council<br><input type="checkbox"/> Other (Specify): _____                                                 |
| <input type="checkbox"/> F4 Safety from falling                                                 | <input type="checkbox"/> F4/AS1                                                                                                                                                                                                                                  |                                                                   | <input type="checkbox"/>                                    | <input type="checkbox"/>                                   | <input type="checkbox"/> Council<br><input type="checkbox"/> Other (Specify): _____                                                 |
| <input type="checkbox"/> F5 Construction and demolition hazards                                 | <input type="checkbox"/> F5/AS1                                                                                                                                                                                                                                  |                                                                   | <input type="checkbox"/>                                    | <input type="checkbox"/>                                   | <input type="checkbox"/> Council<br><input type="checkbox"/> Other (Specify): _____                                                 |
| <input type="checkbox"/> F6 Visibility in escape routes                                         | <input type="checkbox"/> F6/AS1                                                                                                                                                                                                                                  |                                                                   | <input type="checkbox"/>                                    | <input type="checkbox"/>                                   | <input type="checkbox"/> Council<br><input type="checkbox"/> Other (Specify): _____                                                 |
| <input checked="" type="checkbox"/> F7 Warning systems                                          | <input checked="" type="checkbox"/> F7/AS1                                                                                                                                                                                                                       |                                                                   | <input type="checkbox"/>                                    | <input type="checkbox"/>                                   | <input checked="" type="checkbox"/> Council<br><input type="checkbox"/> Engineer<br><input type="checkbox"/> Other (Specify): _____ |



| Building Code Clause<br><i>Tick relevant clauses</i>                               | Acceptable Solution<br>&<br>NZS 4121<br>Accessible Design                                                                             | Verification<br>Method                                               | Alternative<br>Solution<br>[Supporting<br>documents<br>listed below] | Waiver/<br>Modification<br>[Supporting<br>documents<br>listed below] | Proposed<br>Inspections                                                                |
|------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|----------------------------------------------------------------------|----------------------------------------------------------------------|----------------------------------------------------------------------------------------|
| <input type="checkbox"/> F8 Signs                                                  | <input type="checkbox"/> F8/AS1 <input type="checkbox"/> NZS 4121                                                                     |                                                                      | <input type="checkbox"/>                                             | <input type="checkbox"/>                                             | <input type="checkbox"/> Council<br><input type="checkbox"/> Other (Specify):<br>_____ |
| <input type="checkbox"/> G1 Personal hygiene                                       | <input type="checkbox"/> G1/AS1 <input type="checkbox"/> NZS 4121                                                                     |                                                                      | <input type="checkbox"/>                                             | <input type="checkbox"/>                                             | <input type="checkbox"/> Council<br><input type="checkbox"/> Other (Specify):<br>_____ |
| <input type="checkbox"/> G2 Laundering                                             | <input type="checkbox"/> G2/AS1 <input type="checkbox"/> NZS 4121                                                                     |                                                                      | <input type="checkbox"/>                                             | <input type="checkbox"/>                                             | <input type="checkbox"/> Council<br><input type="checkbox"/> Other (Specify):<br>_____ |
| <input type="checkbox"/> G3 Food preparation and<br>prevention of<br>contamination | <input type="checkbox"/> G3/AS1 <input type="checkbox"/> NZS 4121                                                                     |                                                                      | <input type="checkbox"/>                                             | <input type="checkbox"/>                                             | <input type="checkbox"/> Council<br><input type="checkbox"/> Other (Specify):<br>_____ |
| <input type="checkbox"/> G4 Ventilation                                            | <input type="checkbox"/> G4/AS1                                                                                                       | <input type="checkbox"/> G4/VM1                                      | <input type="checkbox"/>                                             | <input type="checkbox"/>                                             | <input type="checkbox"/> Council<br><input type="checkbox"/> Other (Specify):<br>_____ |
| <input type="checkbox"/> G5 Interior environment                                   | <input type="checkbox"/> G5/AS1                                                                                                       | <input type="checkbox"/> G5/VM1                                      | <input type="checkbox"/>                                             | <input type="checkbox"/>                                             | <input type="checkbox"/> Council<br><input type="checkbox"/> Other (Specify):<br>_____ |
| <input type="checkbox"/> G6 Airborne impact sound                                  | <input type="checkbox"/> G6/AS1                                                                                                       | <input type="checkbox"/> G6/VM1                                      | <input type="checkbox"/>                                             | <input type="checkbox"/>                                             | <input type="checkbox"/> Council<br><input type="checkbox"/> Other (Specify):<br>_____ |
| <input type="checkbox"/> G7 Natural light                                          | <input type="checkbox"/> G7/AS1                                                                                                       | <input type="checkbox"/> G7/VM1                                      | <input type="checkbox"/>                                             | <input type="checkbox"/>                                             | <input type="checkbox"/> Council<br><input type="checkbox"/> Other (Specify):<br>_____ |
| <input type="checkbox"/> G8 Artificial light                                       | <input type="checkbox"/> G8/AS1                                                                                                       | <input type="checkbox"/> G8/VM1                                      | <input type="checkbox"/>                                             | <input type="checkbox"/>                                             | <input type="checkbox"/> Council<br><input type="checkbox"/> Other (Specify):<br>_____ |
| <input type="checkbox"/> G9 Electricity                                            | <input type="checkbox"/> G9/AS1                                                                                                       | <input type="checkbox"/> G9/VM1                                      | <input type="checkbox"/>                                             | <input type="checkbox"/>                                             | By certification only                                                                  |
| <input type="checkbox"/> G10 Piped services                                        | <input type="checkbox"/> G10/AS1                                                                                                      | <input type="checkbox"/> G10/VM1                                     | <input type="checkbox"/>                                             | <input type="checkbox"/>                                             | By certification only                                                                  |
| <input type="checkbox"/> G11 Gas as an energy source                               | <input type="checkbox"/> G11/AS1                                                                                                      |                                                                      | <input type="checkbox"/>                                             | <input type="checkbox"/>                                             | By certification only                                                                  |
| <input type="checkbox"/> G12 Water supplies                                        | <input type="checkbox"/> G12/AS1 <input type="checkbox"/> G12/AS2                                                                     | <input type="checkbox"/> G12/VM1                                     | <input type="checkbox"/>                                             | <input type="checkbox"/>                                             | <input type="checkbox"/> Council<br><input type="checkbox"/> Other (Specify):<br>_____ |
| <input type="checkbox"/> G13 Foul water                                            | <input type="checkbox"/> G13/AS1 <input type="checkbox"/> G13/AS2<br><input type="checkbox"/> AS3500 <input type="checkbox"/> G13/AS3 | <input type="checkbox"/> G13/VM1<br><input type="checkbox"/> G13/VM4 | <input type="checkbox"/>                                             | <input type="checkbox"/>                                             | <input type="checkbox"/> Council<br><input type="checkbox"/> Other (Specify):<br>_____ |
| <input type="checkbox"/> G14 Industrial liquid waste                               | <input type="checkbox"/> G14/AS1                                                                                                      | <input type="checkbox"/> G14/VM1                                     | <input type="checkbox"/>                                             | <input type="checkbox"/>                                             | <input type="checkbox"/> Council<br><input type="checkbox"/> Other (Specify):<br>_____ |
| <input type="checkbox"/> G15 Solid waste                                           | <input type="checkbox"/> G15/AS1                                                                                                      |                                                                      | <input type="checkbox"/>                                             | <input type="checkbox"/>                                             | <input type="checkbox"/> Council<br><input type="checkbox"/> Other (Specify):<br>_____ |
| <input type="checkbox"/> H1 Energy efficiency                                      | <input type="checkbox"/> H1/AS1                                                                                                       | <input type="checkbox"/> H1/VM1                                      | <input type="checkbox"/>                                             | <input type="checkbox"/>                                             | <input type="checkbox"/> Council<br><input type="checkbox"/> Other (Specify):<br>_____ |



## 8. WAIVER/MODIFICATION TO NZ BUILDING CODE REQUIRED FOR FOLLOWING PARTS OF CODE:

Supporting documentation attached as follows [please list]:

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## 9. COMPLIANCE SCHEDULE

The specified systems for the building are as follows: [specified systems are defined in regulations]

| Any system installed from below to be accompanied by procedures for inspection and routine maintenance. [Council to vet and verify in first column.] |                                                                                                                                                                                     | COUNCIL                  | Applicant to complete    |                          |                          |                          |                          |
|------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
|                                                                                                                                                      |                                                                                                                                                                                     |                          | Existing                 | New                      | Altered                  | Added                    | Removed                  |
| There are no specified systems in the building <input checked="" type="checkbox"/>                                                                   |                                                                                                                                                                                     |                          |                          |                          |                          |                          |                          |
| Specified Systems Prescribed by Building Act 2004 Compliance Schedule Handbook 25 May 2007                                                           |                                                                                                                                                                                     |                          |                          |                          |                          |                          |                          |
| ss1                                                                                                                                                  | Automatic systems for fire suppression                                                                                                                                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ss2                                                                                                                                                  | Automatic or manual emergency warning systems for fire or other dangers (other than a warning system for fire that is entirely within a household unit and services only that unit) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ss3                                                                                                                                                  | Electromagnetic or automatic doors and windows                                                                                                                                      |                          |                          |                          |                          |                          |                          |
|                                                                                                                                                      | ss3/1 Automatic doors                                                                                                                                                               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                                                                                                                                      | ss3/2 Access controlled doors                                                                                                                                                       | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                                                                                                                                      | ss3/3 Interfaced fire or smoke doors or windows                                                                                                                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ss4                                                                                                                                                  | Emergency lighting systems                                                                                                                                                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ss5                                                                                                                                                  | Escape route pressurisation systems                                                                                                                                                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ss6                                                                                                                                                  | Riser mains for use by fire services                                                                                                                                                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ss7                                                                                                                                                  | Automatic back-flow preventers connected to a potable water supply                                                                                                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ss8                                                                                                                                                  | Lifts, escalators, travelators, or other systems for moving people or goods within buildings                                                                                        |                          |                          |                          |                          |                          |                          |
|                                                                                                                                                      | ss8/1 Passenger carrying lifts                                                                                                                                                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                                                                                                                                      | ss8/2 Services lifts                                                                                                                                                                | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                                                                                                                                      | ss8/3 Escalators and moving walks                                                                                                                                                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ss9                                                                                                                                                  | ss9/1 Mechanical ventilation                                                                                                                                                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                                                                                                                                      | ss9/2 Air conditioning systems                                                                                                                                                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ss10                                                                                                                                                 | Building maintenance units providing access to exterior and interior walls of buildings                                                                                             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ss11                                                                                                                                                 | Laboratory fume cupboards                                                                                                                                                           | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ss12                                                                                                                                                 | Audio loops or other assistive listening systems                                                                                                                                    |                          |                          |                          |                          |                          |                          |
|                                                                                                                                                      | ss12/1 Audio loops                                                                                                                                                                  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                                                                                                                                      | ss12/2 FM radio frequency systems and infrared beam transmission systems                                                                                                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ss13                                                                                                                                                 | Smoke control systems                                                                                                                                                               |                          |                          |                          |                          |                          |                          |
|                                                                                                                                                      | ss13/1 Mechanical smoke control                                                                                                                                                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                                                                                                                                      | ss13/2 Natural smoke control                                                                                                                                                        | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                                                                                                                                      | ss13/3 Smoke curtains                                                                                                                                                               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ss14                                                                                                                                                 | Emergency power systems for a system or feature specified in any of specified systems 1-13                                                                                          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                                                                                                                                      | ss14/1 Emergency power systems                                                                                                                                                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|                                                                                                                                                      | ss14/2 Signs in relation to any specified systems 1-13                                                                                                                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |



# COMPLIANCE SCHEDULE [Continued]

|      |                                                                                       | Applicant to complete    |                          |                          |                          |                          |                          |
|------|---------------------------------------------------------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
|      |                                                                                       | COUNCIL                  | Existing                 | New                      | Altered                  | Added                    | Removed                  |
| ss15 | Other fire safety systems or features                                                 |                          |                          |                          |                          |                          |                          |
|      | ss15/1 Systems for communicating spoken information intended to facilitate evacuation | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|      | ss15/2 Final exits                                                                    | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|      | ss15/3 Fire separations                                                               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|      | ss15/4 Signs for communicating information intended to facilitate evacuation          | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
|      | Ss15/5 Smoke separations                                                              | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| ss16 | Cable cars                                                                            | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

\*Only include where one or more of ss1-6, 9 or 13 are included.

## 10. ATTACHMENTS

The following documents are attached to this application: [Tick as applicable]

☐ Plans and specifications (list) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

- ☐ Memoranda from licensed building practitioner(s) who carried out or supervised any design work that is restricted building work
- ☐ Project Information Memorandum
- ☐ Development contribution notice
- ☐ Certificate attached to Project Information Memorandum
- ☐ National Environmental Standard Checklist
- ☐ Other information relevant to this application: [Please specify]: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



# COUNCIL USE ONLY

## ESTIMATED TOTAL VALUE OF WORK

\$ 9533 GST inclusive Project floor area \_\_\_\_\_ m<sup>2</sup>

### FEE PAYABLE

Project Information Memorandum \$ — ✓  
Building Administration \$ 130 ✓  
Technical Processing fee \$ 85  
Inspection fee \$ 118 485 ✓  
Certificate of Title \$ 15 ✓  
Other \$ \_\_\_\_\_

### LODGEMENT FEE

\$ 433  
Technical Processing fee \$ \_\_\_\_\_  
Inspection fee \$ \_\_\_\_\_  
Industry Levy (DBH) \$ \_\_\_\_\_  
Industry Levy (BRANZ) \$ \_\_\_\_\_  
BCA Levy \$ \_\_\_\_\_  
Vetting \$ \_\_\_\_\_  
Producer Statements \$ \_\_\_\_\_  
Compliance Schedules \$ \_\_\_\_\_  
Vehicle Crossing \$ \_\_\_\_\_  
Street Damage \$ \_\_\_\_\_  
Water Connection \$ \_\_\_\_\_  
Sewer Connection \$ \_\_\_\_\_  
Peer Review \$ \_\_\_\_\_  
NZFS \$ \_\_\_\_\_  
Development Contribution \$ \_\_\_\_\_  
\$ \_\_\_\_\_  
\$ \_\_\_\_\_

### TOTAL BALANCE PAYABLE

\$ 433 —  
Lodgement deposit \$ 15/11/13  
Date paid 137395  
Receipt No. \_\_\_\_\_  
Consent fee balance \$ \_\_\_\_\_  
Date paid \_\_\_\_\_  
Receipt No. \_\_\_\_\_

\$85 —  
Refund voucher # 172385  
5/12/13

Refund \$85.00  
over paid

BC ONLY  
# -71873

Teel

Granted by E Morris

Signature \_\_\_\_\_

Date 5.12.2013

Issued by H Ferguson

Signature \_\_\_\_\_

Date 5/12/13

Please complete

Forward any refunds or further invoices to:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_





## ADVICE OF LICENSED BUILDING PRACTITIONER/(S)

### Section 87, Building Act 2004

#### 1 THE BUILDING (project location)

Building name (if applicable) \_\_\_\_\_

Building street address: 10B Taurus Place

#### 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): MRS Tessa Johnson

Address: 10. b, Taurus Place Rotorua

Date: 15. 11. 13 Landline: 07- 348 7807

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    |
|-------------------------------------------------|-------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------|--------------------|
| Re roofing in corrugate long run                | Name: <u>Greg Sheppard</u><br>Address: <u>15 Manokiki St</u><br>Email: _____<br>Telephone: <u>350 11 38</u> | <u>BP110839</u>                                                                                                      | <u>Roofing R.2</u> |
|                                                 | Name: _____<br>Address: _____<br>Email: _____<br>Telephone: _____                                           |                                                                                                                      |                    |
|                                                 | Name: _____<br>Address: _____<br>Email: _____<br>Telephone: _____                                           |                                                                                                                      |                    |



#### 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 |
|-------------------------------------------------|--------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------|-----------------|
|                                                 | Name: _____<br>Address: _____<br>Email: _____<br>Telephone: _____        |                                                                                                                      |                 |
|                                                 | Name: _____<br>Address: _____<br>Email: _____<br>Telephone: _____        |                                                                                                                      |                 |
|                                                 | Name: _____<br>Address: _____<br>Email: _____<br>Telephone: _____        |                                                                                                                      |                 |
|                                                 | Name: _____<br>Address: _____<br>Email: _____<br>Telephone: _____        |                                                                                                                      |                 |
|                                                 | Name: _____<br>Address: _____<br>Email: _____<br>Telephone: _____        |                                                                                                                      |                 |
|                                                 | Name: _____<br>Address: _____<br>Email: _____<br>Telephone: _____        |                                                                                                                      |                 |
|                                                 | Name: _____<br>Address: _____<br>Email: _____<br>Telephone: _____        |                                                                                                                      |                 |

#### SIGNATURE

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

Name of person signing:

*D. Smith*

Date:

*15. 11. 13*

#### COUNCIL USE ONLY

LBP(s) checked

Y

All OK

Y

N

Comments:



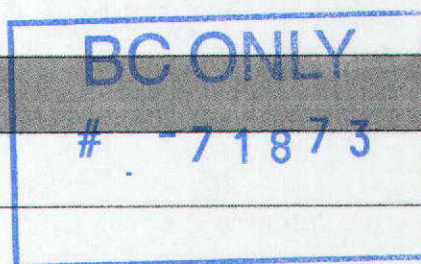
# Memorandum from licensed building practitioner: Certificate of design work

## Section 45 and section 30c, Building Act 2004

Please fill in the form as fully and correctly as possible.

If there is insufficient room on the form for requested details, please continue on another sheet and attach the additional sheet(s) to this form.

| THE BUILDING                    |           |
|---------------------------------|-----------|
| B                               |           |
| Street address: 10 Taurus Place |           |
| Suburb:                         |           |
| Town/City: Rotorua              | Postcode: |



| THE OWNER(S)                         |                     |
|--------------------------------------|---------------------|
| Name(s): Tessa Johnson               |                     |
| Mailing Address: 10, b. Taurus Place |                     |
| Suburb:                              | PO Box/Private Bag: |
| Town/City: Rotorua                   | Postcode:           |
| Phone Number: 07-3437-807            | Email Address:      |

| BASIS FOR PROVIDING THIS MEMORANDUM                                                                                                                                                                                                                                     |  |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| I am providing this memorandum in my role as the: Please tick the option that applies <input checked="" type="checkbox"/>                                                                                                                                               |  |
| <input checked="" type="checkbox"/> sole designer of all of the RBW design outlined in this memorandum – I carried out all of the RBW design work myself – no other person will be providing any additional memoranda for the project                                   |  |
| <input type="checkbox"/> lead designer who carried out some of the RBW design myself but also supervised other designers – this memorandum covers their RBW design work as well as mine, and no other person will be providing any additional memoranda for the project |  |
| <input type="checkbox"/> lead designer for all but specific elements of RBW – this memorandum only covers the RBW design work that I carried out or supervised and the other designers will provide their own memorandum relating to their specific RBW design          |  |
| <input type="checkbox"/> specialist designer who carried out specific elements of RBW design work as outlined in this memorandum – other designers will be providing a memorandum covering the remaining RBW design work                                                |  |



# IDENTIFICATION OF DESIGN WORK THAT IS RESTRICTED BUILDING WORK

I, Margaretha McLaughlin carried out/supervised the following design work that is restricted building work

## PRIMARY STURCTURE: B1

| Design work that is RBW                                                                                       | Description of RBW                         | Carried out or supervised                                                                                                                  | Reference to plans and specifications |
|---------------------------------------------------------------------------------------------------------------|--------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|
| Tick <input checked="" type="checkbox"/> if included<br>Cross <input checked="" type="checkbox"/> if excluded | If appropriate, provide details of the RBW | Tick <input checked="" type="checkbox"/> whether you carried out this design work or supervised someone else carrying out this design work | If appropriate, specify reference     |
| All RBW design work relating to B1 <input checked="" type="checkbox"/>                                        |                                            | <input checked="" type="checkbox"/> Carried out<br><input type="checkbox"/> Supervised                                                     |                                       |
| Foundations and subfloor framing <input checked="" type="checkbox"/>                                          |                                            | <input checked="" type="checkbox"/> Carried out<br><input type="checkbox"/> Supervised                                                     |                                       |
| Roof (excluding roof trusses) <input checked="" type="checkbox"/>                                             |                                            | <input checked="" type="checkbox"/> Carried out<br><input type="checkbox"/> Supervised                                                     |                                       |
| Walls <input checked="" type="checkbox"/>                                                                     |                                            | <input checked="" type="checkbox"/> Carried out<br><input type="checkbox"/> Supervised                                                     |                                       |
| Bracing <input checked="" type="checkbox"/>                                                                   |                                            | <input checked="" type="checkbox"/> Carried out<br><input type="checkbox"/> Supervised                                                     |                                       |
| Column and beams <input checked="" type="checkbox"/>                                                          |                                            | <input checked="" type="checkbox"/> Carried out<br><input type="checkbox"/> Supervised                                                     |                                       |
| Other <input checked="" type="checkbox"/>                                                                     |                                            | <input checked="" type="checkbox"/> Carried out<br><input type="checkbox"/> Supervised                                                     |                                       |



| EXTERNAL MOISTURE MANAGEMENT SYSTEMS: E2                                                                      |                                            |                                                                                                                                            |                                       |
|---------------------------------------------------------------------------------------------------------------|--------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|
| Design work that is RBW                                                                                       | Description of RBW                         | Carried out or supervised                                                                                                                  | Reference to plans and specifications |
| Tick <input checked="" type="checkbox"/> if included<br>Cross <input checked="" type="checkbox"/> if excluded | If appropriate, provide details of the RBW | Tick <input checked="" type="checkbox"/> whether you carried out this design work or supervised someone else carrying out this design work | If appropriate, specify reference     |
| All RBW design work relating to E2 <input checked="" type="checkbox"/>                                        |                                            | <input checked="" type="checkbox"/> Carried out<br><input type="checkbox"/> Supervised                                                     |                                       |
| Damp proofing <input checked="" type="checkbox"/>                                                             |                                            | <input checked="" type="checkbox"/> Carried out<br><input type="checkbox"/> Supervised                                                     |                                       |
| Roof cladding or roof cladding system <input checked="" type="checkbox"/>                                     | Roof Details                               | <input checked="" type="checkbox"/> Carried out<br><input type="checkbox"/> Supervised                                                     | Sheet 2/3                             |
| Ventilation system (for example subfloor or cavity) <input checked="" type="checkbox"/>                       |                                            | <input checked="" type="checkbox"/> Carried out<br><input type="checkbox"/> Supervised                                                     |                                       |
| Wall cladding or wall cladding system <input checked="" type="checkbox"/>                                     |                                            | <input checked="" type="checkbox"/> Carried out<br><input type="checkbox"/> Supervised                                                     |                                       |
| Waterproofing <input checked="" type="checkbox"/>                                                             |                                            | <input checked="" type="checkbox"/> Carried out<br><input type="checkbox"/> Supervised                                                     |                                       |
| Other <input checked="" type="checkbox"/>                                                                     |                                            | <input checked="" type="checkbox"/> Carried out<br><input type="checkbox"/> Supervised                                                     |                                       |



| FIRE SAFETY SYSTEMS                                                                                                                                                                                                  |                                            |                                                                                                                                            |                                       |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------|
| Design work that is RBW                                                                                                                                                                                              | Description of RBW                         | Carried out or supervised                                                                                                                  | Reference to plans and specifications |
| Tick <input checked="" type="checkbox"/> if included<br>Cross <input checked="" type="checkbox"/> if excluded                                                                                                        | If appropriate, provide details of the RBW | Tick <input checked="" type="checkbox"/> whether you carried out this design work or supervised someone else carrying out this design work | If appropriate, specify reference     |
| Emergency warning systems <input checked="" type="checkbox"/>                                                                                                                                                        |                                            | <input type="checkbox"/> Carried out<br><input type="checkbox"/> Supervised                                                                |                                       |
| Evacuation and fire-service operation systems <input checked="" type="checkbox"/>                                                                                                                                    |                                            | <input type="checkbox"/> Carried out<br><input type="checkbox"/> Supervised                                                                |                                       |
| Suppression or control systems <input checked="" type="checkbox"/>                                                                                                                                                   |                                            | <input type="checkbox"/> Carried out<br><input type="checkbox"/> Supervised                                                                |                                       |
| Other <input checked="" type="checkbox"/>                                                                                                                                                                            |                                            | <input type="checkbox"/> Carried out<br><input type="checkbox"/> Supervised                                                                |                                       |
| <b>NOTE: The design of fire safety systems is only restricted building work when it involves small-to-medium apartment buildings as defined by the Building (Definition of Restricted Building Work) Order 2011.</b> |                                            |                                                                                                                                            |                                       |



| WAIVERS AND MODIFICATIONS                                                                                                       |                                                          |
|---------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------|
| Waivers or modifications of the Building Code are required. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO |                                                          |
| If Yes, provide details of the waivers below:                                                                                   |                                                          |
| Clause                                                                                                                          | Waiver/modification required                             |
| List relevant clause numbers of building code                                                                                   | Specify nature of modifications of building code require |
|                                                                                                                                 |                                                          |
|                                                                                                                                 |                                                          |
|                                                                                                                                 |                                                          |



| ISSUED BY                                                                                                                                                                    |                                      |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------|
| Name and contact details of the licensed building practitioner who is licensed to carry out or supervise design work that is restricted building work.                       |                                      |
| Name: Margaretha McLaughlin                                                                                                                                                  | LBP or Registration number: BP100139 |
| The practitioner is a: <input checked="" type="checkbox"/> Design LBP <input type="checkbox"/> Registered Architect <input type="checkbox"/> Chartered Professional Engineer |                                      |
| Design Entity or Company (optional):                                                                                                                                         |                                      |
| Mailing Address (if different from below):                                                                                                                                   |                                      |
| Street Address/Registered Office: 31A Rutland Street                                                                                                                         |                                      |
| Suburb: Utuhina                                                                                                                                                              | Town/City: Rotorua                   |
| PO Box/Private Bag:                                                                                                                                                          | Postcode: 3015                       |
| Phone number: (07) 3491635                                                                                                                                                   | Mobile: 0212862631                   |
| After Hours: (07) 3491635                                                                                                                                                    | Fax: (07) 3491636                    |
| Email Address: margotmclaughlin@ihug.co.nz                                                                                                                                   | Website:                             |

| DECLARATION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>I Margaretha McLaughlin LBP, state that I have applied the skill and care reasonably required of a competent design professional in carrying out or supervising the Restricted Building Work (RBW) described in this form, and that based on this, I also state that the RBW:</p> <ul style="list-style-type: none"> <li>• Complies with the Building Code, or</li> <li>• Compiles with the building code subject to any waiver or modification of the building code recorded on this form</li> </ul> <p>Signature: </p> <p>Date: 07/11/2013</p> |





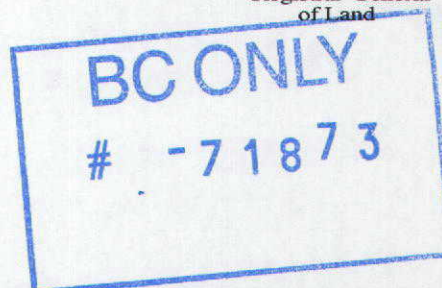
# COMPOSITE COMPUTER REGISTER UNDER LAND TRANSFER ACT 1952



Search Copy

R. W. Muir  
Registrar-General  
of Land

**Identifier** SA25D/101  
**Land Registration District** South Auckland  
**Date Issued** 14 February 1980



**Prior References**  
SA21B/1357

**Estate** Fee Simple - 1/2 share  
**Area** 1013 square metres more or less  
**Legal Description** Lot 17 Deposited Plan South Auckland  
22220

**Proprietors**  
Tessa Marie Johnson

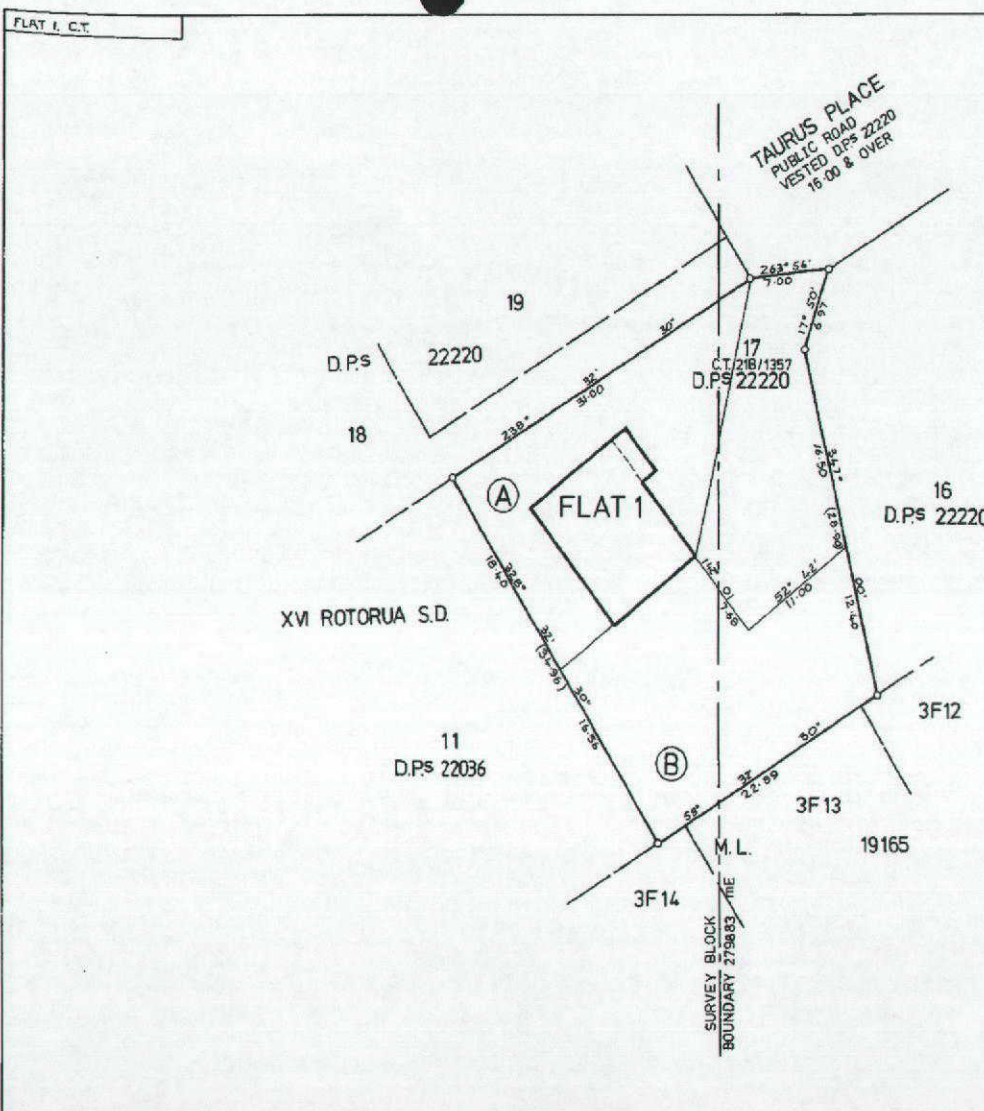
|                          |                                               |                   |                                   |
|--------------------------|-----------------------------------------------|-------------------|-----------------------------------|
| <b>Estate</b>            | Leasehold                                     | <b>Instrument</b> | L H273302                         |
|                          |                                               | <b>Term</b>       | 999 years commencing on 14.1.1980 |
| <b>Legal Description</b> | Flat 1 Deposited Plan South Auckland<br>28131 |                   |                                   |

**Proprietors**  
Tessa Marie Johnson

## Interests

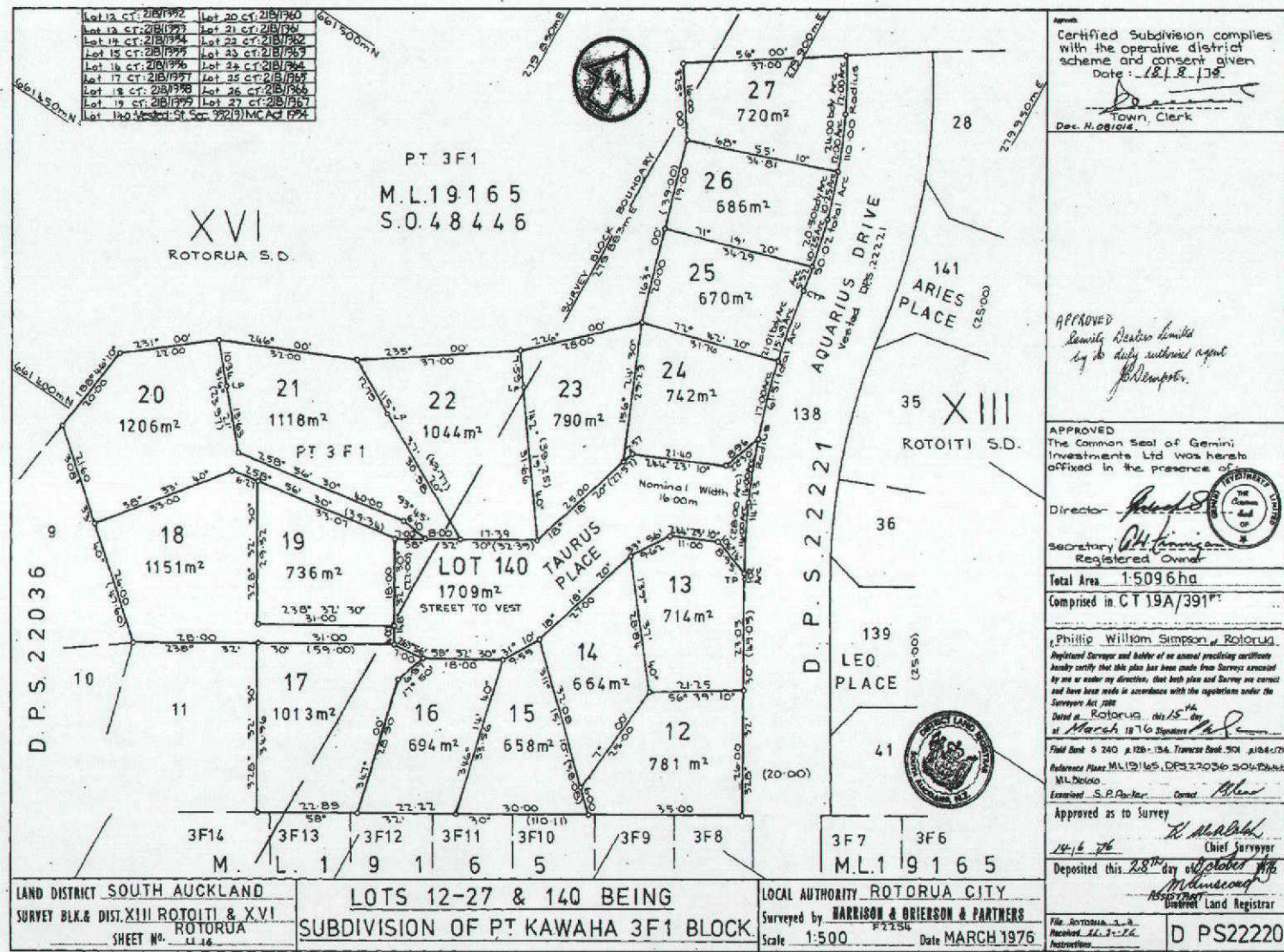
H273302 Lease of Flat 1 DP South Auckland 28131 Term 999 years commencing on 14.1.1980 Composite CT  
SA25D/101 issued - 14.2.1980 (Affects Fee Simple)  
H315266.1 Lease of Flat 2 Plan S29163 Term 999 years commencing on 19.9.1980 CT SA26C/59 issued -  
11.1980 at 9.35 am (Affects Fee Simple)  
5621853.3 Mortgage to (now) Westpac New Zealand Limited - 13.6.2003 at 9:00 am



|                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>FLAT 1, C.T.</p>  <p>FLAT 1</p> <p>TAURUS PLACE<br/>PUBLIC ROAD<br/>VESTED D.P.S 22220<br/>15.00 &amp; OVER</p> <p>19<br/>D.P.S 22220</p> <p>18<br/>D.P.S 22036</p> <p>17<br/>D.P.S 22220</p> <p>16<br/>D.P.S 22220</p> <p>XVI ROTORUA S.D.</p> <p>XIII ROTITI S.D.</p> <p>3F12</p> <p>3F13</p> <p>3F14</p> <p>M.L.</p> <p>SURVEY BLOCK BOUNDARY 279883</p> <p>19165</p> |                                                                | <p>The common seal of NORTH ISLAND CONSTRUCTION LIMITED was hereon affixed in the presence of<br/>Director <i>John</i><br/>Director <i>John</i></p> <p>REGISTERED OWNER</p> <p>PURSUANT TO SECTION 314 OF THE LOCAL GOVERNMENT ACT 1974 I HEREBY CERTIFY THAT THE OWNER - OCCUPIER FLAT DEPICTED HEREON COMPLIES WITH THE BY LAWS OF THE ROTORUA DISTRICT COUNCIL AND THAT ANY LEASE OF ANY FLAT SHOWN HEREON WILL NOT CONTRAVENE ANY PROVISION OF THE TOWN AND COUNTRY PLANNING ACT 1977</p> <p>DATED THIS <i>10<sup>th</sup></i> DAY OF <i>December</i> 1979</p> <p><i>[Signature]</i><br/>DISTRICT EXECUTIVE OFFICER</p> <p>I Herby certify that the buildings shown hereon are within the boundaries of C.T. 21B/1357 being lot 17 D.P.S 22220</p> <p><i>[Signature]</i><br/>Registered Surveyor</p> <p>Total Area <i>1013 m<sup>2</sup></i><br/>Comprised in C.T. 21B/1357 (A11)</p> <p><i>ALAN WILLIAM REX MCGAUL</i> of ROTORUA<br/>Registered Surveyor and holder of an unexpired practicing certificate hereby certify that this plan has been made from surveys executed by me or under my direction; that both plan and survey are correct and have been made in accordance with the regulations under the Surveyors Act 1958</p> <p>Dated at <i>Rotorua</i> this <i>21<sup>st</sup></i> day of <i>November</i> 1979 Signature <i>[Signature]</i></p> <p>Field Book <i>p. 1</i> Traverse Book <i>p. 1</i><br/>Reference Plans D.P.S 22220 M.L. 19165</p> <p>Examined <i>C.J. Elliott</i> Correct money <i>Robert</i></p> <p>Approved for Leasing Purposes only</p> <p>29.1.1980 <i>[Signature]</i> L.T. Surveyor</p> <p>Deposited this <i>31<sup>st</sup></i> day of <i>January</i> 1980<br/><i>[Signature]</i> Assistant District Land Registrar</p> <p>Scale 1:250 Date OCTOBER 1979</p> <p>DPS 28131</p> |
| <p>LAND DISTRICT SOUTH AUCKLAND<br/>SURVEY BLK. &amp; DIST. XIII ROTITI &amp; XVI ROTORUA<br/>NZMS SHEET No. <i>ROTORUA</i></p>                                                                                                                                                                                                                                                                                                                                | <p>Flat on Lot 17 D.P.S 22220<br/>being Pt Kawaha 3F1 Blk.</p> | <p>LOCAL AUTHORITY ROTORUA DISTRICT<br/>Surveyed by D.A. LINTON &amp; ASSOCIATES<br/>Scale 1:250 Date OCTOBER 1979</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |

Identifier  
SA25D/101







## Re-Roof Processing and Vetting Checklist

*For initial completion by the applicant*

Ref: CPV 07  
Ver: 06  
Issued 21 Dec 2012  
RDC-144307  
Page 1 of 2

| Copies Rqd                                                                                                                                                                                                                                                              | ADMINISTRATION CHECKLIST<br><i>To be completed by Customer Service Centre</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Complete<br>✓                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 2                                                                                                                                                                                                                                                                       | Geyserview printout (contour plan) checked with Applicant for Correctness                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| 1                                                                                                                                                                                                                                                                       | Green PIM/BC Master cover has been completed                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| 1                                                                                                                                                                                                                                                                       | Site Inspection Card completed                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| 1                                                                                                                                                                                                                                                                       | Applicant Inspection card complete                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| 1                                                                                                                                                                                                                                                                       | Form 6 (Application for Code Compliance Certificate) attached to Applicant Inspection Card                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|                                                                                                                                                                                                                                                                         | Form 2 administratively complete and front cover signed appropriately                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| <b>Lodgment category cost for building consent is 4A with an additional inspection of ½ hour</b>                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| <b>Applicant</b><br>S = Supplied<br>N/A = Not Applicable<br><br>Please arrange an vetting appointment through customer services should you wish to lodge this application in person (2 copies of plans and any relevant specifications to be supplied with application) |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| <b>Building Consent No.</b>                                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | <b>Processor Name:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| <b>Form 2</b>                                                                                                                                                                                                                                                           | Building Consent Application Form completed and signed<br>Roofing is defined as "restricted building work". The design must be completed out by a Licensed Designer?<br>As this project is defined as "restricted building work" a Form 2A (Certificate of Design Work) must be provided.<br>Have all Licensed Building Practitioner's been identified?                                                                                                                                                                                                                  | <div style="display: flex; justify-content: space-between;"> <div style="text-align: center;">S</div> <div style="text-align: center;">N/A</div> <div style="text-align: center;">P</div> <div style="text-align: center;">F</div> <div style="text-align: center;">N/A</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="text-align: center;">Y</div> <div style="text-align: center;">N</div> <div style="text-align: center;">P</div> <div style="text-align: center;">F</div> <div style="text-align: center;">N/A</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="text-align: center;">Y</div> <div style="text-align: center;">N</div> <div style="text-align: center;">P</div> <div style="text-align: center;">F</div> <div style="text-align: center;">N/A</div> </div> <div style="display: flex; justify-content: space-between;"> <div style="text-align: center;">Y</div> <div style="text-align: center;">N</div> <div style="text-align: center;">P</div> <div style="text-align: center;">F</div> <div style="text-align: center;">N/A</div> </div> |
| <b>Site Plan</b>                                                                                                                                                                                                                                                        | House plans or Geyser View plan can be used to meet this requirement, request representative from Customer Services to print 2 copies.<br><i>(indicate area of re-roof on this plan)</i><br><br>Owner / Address match Form 2?                                                                                                                                                                                                                                                                                                                                            | <div style="display: flex; justify-content: space-between;"> <div style="text-align: center;">S</div> <div style="text-align: center;">N/A</div> <div style="text-align: center;">P</div> <div style="text-align: center;">F</div> <div style="text-align: center;">N/A</div> </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>1</b>                                                                                                                                                                                                                                                                | Detail what type of roofing material exists <i>METAL TUBES TO LONG RUN</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | <div style="display: flex; justify-content: space-between;"> <div style="text-align: center;">S</div> <div style="text-align: center;">N/A</div> <div style="text-align: center;">P</div> <div style="text-align: center;">F</div> <div style="text-align: center;">N/A</div> </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>2</b>                                                                                                                                                                                                                                                                | Details of the new of roofing material that is to be used<br><input checked="" type="checkbox"/> Tiles <i>concrete</i> , metal)<br><input type="checkbox"/> Membrane<br><input checked="" type="checkbox"/> Iron <i>color steel</i> alloy, zincalume, galvanized)<br><input checked="" type="checkbox"/> underlay                                                                                                                                                                                                                                                        | <div style="display: flex; justify-content: space-between;"> <div style="text-align: center;">S</div> <div style="text-align: center;">N/A</div> <div style="text-align: center;">P</div> <div style="text-align: center;">F</div> <div style="text-align: center;">N/A</div> </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>3</b>                                                                                                                                                                                                                                                                | Roof pitch <i>15°</i>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <div style="display: flex; justify-content: space-between;"> <div style="text-align: center;">S</div> <div style="text-align: center;">N/A</div> <div style="text-align: center;">P</div> <div style="text-align: center;">F</div> <div style="text-align: center;">N/A</div> </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>4</b>                                                                                                                                                                                                                                                                | Provide details of any new framing members<br><input type="checkbox"/> Purlin/batten <i>75</i> X <i>50</i> spanning <i>900</i> mm<br><input type="checkbox"/> Rafter <i>X</i> spanning <i>mm</i><br><input type="checkbox"/> Substrate<br><input checked="" type="checkbox"/> Fixings<br><input type="checkbox"/> Other structural members<br><input type="checkbox"/> Treatment of any new members                                                                                                                                                                      | <div style="display: flex; justify-content: space-between;"> <div style="text-align: center;">S</div> <div style="text-align: center;">N/A</div> <div style="text-align: center;">P</div> <div style="text-align: center;">F</div> <div style="text-align: center;">N/A</div> </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| <b>5</b>                                                                                                                                                                                                                                                                | Provide flashing details that meet the roofing manufacturers requirements<br><input checked="" type="checkbox"/> Ridges<br><input type="checkbox"/> Valleys<br><input type="checkbox"/> Barge<br><input type="checkbox"/> up stand<br><input type="checkbox"/> Dormer junctions<br><input type="checkbox"/> Stop ends – kick outs<br><input checked="" type="checkbox"/> Apron<br><input type="checkbox"/> Under flashing to low pitch roofs<br><input type="checkbox"/> Change in pitch flashing<br><input type="checkbox"/> Parapets or handrail junctions or capping. | <div style="display: flex; justify-content: space-between;"> <div style="text-align: center;">S</div> <div style="text-align: center;">N/A</div> <div style="text-align: center;">P</div> <div style="text-align: center;">F</div> <div style="text-align: center;">N/A</div> </div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |



|                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                        |          |            |          |   |            |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|------------|----------|---|------------|
| 6                                                                                                                                                                           | Wind fixings<br>(change of roofing product may result in the need to upgrade up lift fixings specifically where a heavy weight roof is replaced by a light weight product)<br><br>Please circle appropriate site specific wind loading:<br>Low <u>Medium</u> High Very High Specific Engineer Design                                   | <u>S</u> | N/A        | <u>P</u> | F | N/A        |
| 7                                                                                                                                                                           | Bracing to meet NZS 3604 / NZS 1170 D<br>(change of roofing product may result in the need to increase existing bracing)<br><br>Detail both existing braces and the proposed (where the bracing is unknown provide new bracing to comply with the relevant building standard)<br>Space, Plane, <u>hip</u> and valley or Gable end wall | S        | N/A        | <u>P</u> | F | N/A        |
| 8                                                                                                                                                                           | Penetrations through roofing material<br>✓ Terminal vents<br>○ Chimneys<br>○ Skylights<br>○ Solar panels (water pipes) <u>&lt; 300mm</u>                                                                                                                                                                                               | <u>S</u> | N/A        | P        | F | N/A        |
| 9                                                                                                                                                                           | Gutters (are there to be any change to existing gutters or downpipes that are not a direct replacement? Moving location or number of downpipes?)<br>○ Gutter type<br>○ Over flows<br>○ Rainwater heads<br>○ Downpipes<br>○ Drains to soak hole                                                                                         | S        | <u>N/A</u> | P        | F | <u>N/A</u> |
| 10                                                                                                                                                                          | Ventilation to roof/ceiling space (Membrane, enclosed or skillion roofs)                                                                                                                                                                                                                                                               | S        | <u>N/A</u> | P        | F | <u>N/A</u> |
| 11                                                                                                                                                                          | Any fire rating issues that need to be addressed<br>e.g. eaves closer than 650mm to boundary<br>clear light roofing no closer than 1.0m to boundary etc                                                                                                                                                                                | S        | <u>N/A</u> | P        | F | <u>N/A</u> |
| 12                                                                                                                                                                          | Domestic smoke alarm(s) detailed on floor plan (Refer to NZBC F7 for requirements within 3m of sleeping areas and on escape route of each level)                                                                                                                                                                                       | S        | N/A        | <u>P</u> | F | N/A        |
| <b>Additional Fees</b>                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                        |          |            |          |   |            |
| Please be aware that additional fees may be applied after lodgment deposit is paid, for inspections, processing, certificates, government levies and the like (discussed?). |                                                                                                                                                                                                                                                                                                                                        |          |            | Y        | N | Mail       |

**RDC use only**

P = Pass

F = Non-compliance with the Building Code – further information required

N/A= Not Applicable

RDC staff to record reasons for decisions in question text box

**Other considerations (waivers and modifications- alternative solutions, TL authors- - section 75, fire rating etc)**

**GRANTING BUILDING CONSENT**

Sign the application form to grant the building consent once satisfied on reasonable grounds that if the building work was to be constructed in accordance with the approved documents, then compliance with the Building Code will be met.



# GeyserView IV Parcel Report

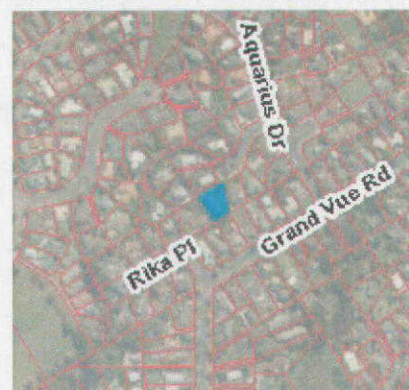
Legal desc: Lot 17 DPS 22220



## Parcel Information

Parcel is 'ghosted'

Owners:





# GeyserView IV Parcel Report

Legal desc: Lot 17 DPS 22220

| Oz Parcel Id | PFile         | Full Address                    | Parcel Name      |
|--------------|---------------|---------------------------------|------------------|
| 7496/10      | P05107        | 1/10 TAURUS PLACE, KAWAHA POINT | FLAT 1 DPS 28131 |
| Title(s)     | SA25D/101     |                                 |                  |
| 7496/11      | P05108        | 2/10 TAURUS PLACE, KAWAHA POINT | FLAT 2 DPS 29163 |
| Title(s)     | SA26C/59      |                                 |                  |
| 0000/761     | UNDERLYING SU | 10 TAURUS PLACE, KAWAHA POINT   | LOT 17 DPS 22220 |
| Title(s)     |               |                                 |                  |

| Valuation      | Address         | Legal Description                                                 |
|----------------|-----------------|-------------------------------------------------------------------|
| 06542*349*00*A | 10 TAURUS PLACE | FLAT 1 DPS 28131 ON LOT 17 DPS 22220 -HAVING INTIN 1013 SQ METRES |
| Capital Value  | \$218,000.00    | Connections:                                                      |
| Land Value     | \$105,000.00    | Sewer 1                                                           |
| Improvements   | FLAT OI         | Water 1                                                           |
| Area (ha)      |                 | Refuse Charges: 0                                                 |

## Rates struck on: 06542\*349\*00\*A

|      |                                  |             |               |          |
|------|----------------------------------|-------------|---------------|----------|
| 1110 | Residential - General Urban Rate | 218000.0000 | 0.002661100   | \$580.12 |
| 2500 | Uniform Annual General Charge    | 1.0000      | 603.750000000 | \$603.75 |
| 3620 | Lakes Enhancement Rate           | 1.0000      | 18.975000000  | \$18.98  |
| 3720 | Urban Sewerage Development Rate  | 1.0000      | 3.105000000   | \$3.11   |
| 5520 | Urban Water Connected            | 1.0000      | 213.900000000 | \$213.90 |
| 6132 | Urban Refuse Available           | 1.0000      | 44.275000000  | \$44.28  |
| 7540 | Sewerage Charge 1-4 pans         | 1.0000      | 377.200000000 | \$377.20 |
| 9100 | B O P REGIONAL COUNCIL GEN RATE  | 105000.0000 | 0.000292360   | \$30.69  |
| 9210 | BOP UNIFORM ANNUAL GEN CHARGE    | 1.0000      | 80.454000000  | \$80.45  |
| 9310 | BOP PASSENGER TRANSPORT RATE     | 1.0000      | 43.102000000  | \$43.10  |
| 9410 | LAKES RESTORATION RATE <2HA      | 1.0000      | 71.806000000  | \$71.81  |
| 9470 | BOP AIR ACTION PLAN              | 1.0000      | 22.459500000  | \$22.46  |
| 9660 | KAITUNA CATCHMENT SCHEME RO3 S   | 0.0300      | 778.170500000 | \$23.35  |
| 9690 | KAITUNA CATCHMENT SCHEME RO3 A   | 0.0206      | 28.014000000  | \$0.58   |

0

## Rates struck on: 06542\*349\*00\*B

|      |                                  |             |               |          |
|------|----------------------------------|-------------|---------------|----------|
| 1110 | Residential - General Urban Rate | 218000.0000 | 0.002661100   | \$580.12 |
| 2500 | Uniform Annual General Charge    | 1.0000      | 603.750000000 | \$603.75 |
| 3620 | Lakes Enhancement Rate           | 1.0000      | 18.975000000  | \$18.98  |
| 3720 | Urban Sewerage Development Rate  | 1.0000      | 3.105000000   | \$3.11   |
| 5520 | Urban Water Connected            | 1.0000      | 213.900000000 | \$213.90 |
| 6131 | Urban Refuse Charge              | 1.0000      | 88.550000000  | \$88.55  |
| 7540 | Sewerage Charge 1-4 pans         | 1.0000      | 377.200000000 | \$377.20 |
| 9100 | B O P REGIONAL COUNCIL GEN RATE  | 105000.0000 | 0.000292360   | \$30.69  |
| 9210 | BOP UNIFORM ANNUAL GEN CHARGE    | 1.0000      | 80.454000000  | \$80.45  |
| 9310 | BOP PASSENGER TRANSPORT RATE     | 1.0000      | 43.102000000  | \$43.10  |
| 9410 | LAKES RESTORATION RATE <2HA      | 1.0000      | 71.806000000  | \$71.81  |

DESTINATION

ROTORUA

ROTORUA DISTRICT  
COUNCIL

This map is a user generated static output from an Internet mapping site and is for reference only. Data layers that appear on this map may or may not be accurate, current, or otherwise reliable.



# GeyserView IV Parcel Report

Legal desc: Lot 17 DPS 22220

|      |                                |        |               |         |
|------|--------------------------------|--------|---------------|---------|
| 9470 | BOP AIR ACTION PLAN            | 1.0000 | 22.459500000  | \$22.46 |
| 9660 | KAITUNA CATCHMENT SCHEME RO3 S | 0.0300 | 778.170500000 | \$23.35 |
| 9690 | KAITUNA CATCHMENT SCHEME RO3 A | 0.0207 | 28.014000000  | \$0.58  |
| 0    |                                |        |               |         |

06542\*349\*00\*B 10 TAURUS PLACE FLAT 2 DPS 29163 ON LOT 17 DPS 22220 -HAVING INT IN 1013 SQ METRES

|               |              |                   |
|---------------|--------------|-------------------|
| Capital Value | \$218,000.00 | Connections:      |
| Land Value    | \$105,000.00 | Sewer 1           |
| Improvements  | FLAT OI      | Water 1           |
| Area (ha)     |              | Refuse Charges: 1 |

## Rates struck on: 06542\*349\*00\*A

|      |                                  |             |               |          |
|------|----------------------------------|-------------|---------------|----------|
| 1110 | Residential - General Urban Rate | 218000.0000 | 0.002661100   | \$580.12 |
| 2500 | Uniform Annual General Charge    | 1.0000      | 603.750000000 | \$603.75 |
| 3620 | Lakes Enhancement Rate           | 1.0000      | 18.975000000  | \$18.98  |
| 3720 | Urban Sewerage Development Rate  | 1.0000      | 3.105000000   | \$3.11   |
| 5520 | Urban Water Connected            | 1.0000      | 213.900000000 | \$213.90 |
| 6132 | Urban Refuse Available           | 1.0000      | 44.275000000  | \$44.28  |
| 7540 | Sewerage Charge 1-4 pans         | 1.0000      | 377.200000000 | \$377.20 |
| 9100 | B O P REGIONAL COUNCIL GEN RATE  | 105000.0000 | 0.000292360   | \$30.69  |
| 9210 | BOP UNIFORM ANNUAL GEN CHARGE    | 1.0000      | 80.454000000  | \$80.45  |
| 9310 | BOP PASSENGER TRANSPORT RATE     | 1.0000      | 43.102000000  | \$43.10  |
| 9410 | LAKES RESTORATION RATE <2HA      | 1.0000      | 71.806000000  | \$71.81  |
| 9470 | BOP AIR ACTION PLAN              | 1.0000      | 22.459500000  | \$22.46  |
| 9660 | KAITUNA CATCHMENT SCHEME RO3 S   | 0.0300      | 778.170500000 | \$23.35  |
| 9690 | KAITUNA CATCHMENT SCHEME RO3 A   | 0.0206      | 28.014000000  | \$0.58   |

0

## Rates struck on: 06542\*349\*00\*B

|      |                                  |             |               |          |
|------|----------------------------------|-------------|---------------|----------|
| 1110 | Residential - General Urban Rate | 218000.0000 | 0.002661100   | \$580.12 |
| 2500 | Uniform Annual General Charge    | 1.0000      | 603.750000000 | \$603.75 |
| 3620 | Lakes Enhancement Rate           | 1.0000      | 18.975000000  | \$18.98  |
| 3720 | Urban Sewerage Development Rate  | 1.0000      | 3.105000000   | \$3.11   |
| 5520 | Urban Water Connected            | 1.0000      | 213.900000000 | \$213.90 |
| 6131 | Urban Refuse Charge              | 1.0000      | 88.550000000  | \$88.55  |
| 7540 | Sewerage Charge 1-4 pans         | 1.0000      | 377.200000000 | \$377.20 |
| 9100 | B O P REGIONAL COUNCIL GEN RATE  | 105000.0000 | 0.000292360   | \$30.69  |
| 9210 | BOP UNIFORM ANNUAL GEN CHARGE    | 1.0000      | 80.454000000  | \$80.45  |
| 9310 | BOP PASSENGER TRANSPORT RATE     | 1.0000      | 43.102000000  | \$43.10  |
| 9410 | LAKES RESTORATION RATE <2HA      | 1.0000      | 71.806000000  | \$71.81  |
| 9470 | BOP AIR ACTION PLAN              | 1.0000      | 22.459500000  | \$22.46  |
| 9660 | KAITUNA CATCHMENT SCHEME RO3 S   | 0.0300      | 778.170500000 | \$23.35  |
| 9690 | KAITUNA CATCHMENT SCHEME RO3 A   | 0.0207      | 28.014000000  | \$0.58   |

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