FIELD SHEET

24860/195/1

STRATHALLAN No. 257

Inspector M

File No

Receipt No. 4311

Date Permit Issued / /

OWNER

Name Dexter M. Allan

Mailing Address 18 Turnbull Street

Pareora

BUILDER

Name S-I-S.

Mailing Address

PROPERTY ON WHICH BUILDING IS TO BE ERECTED/DEMOLISHED

SITE

Street No. Same

Street Name

Town/District

Riding

LEGAL DESCRIPTION

Valuation Roll No. 24860/195/1

Lot 4 D.P. 28606

Section Block III

Survey District Patiti

DESCRIPTION OF PROPOSED WORK AND MAIN PURPOSE OF USE

Dwelling Ext

FLOOR AREA

Whole Sq. Metres

DWELLING UNITS

Number Erected

ESTIMATED VALUES $

Building	6500 00
Plumbing	
Drainage	
TOTAL	6500 00

NATURE OF PERMIT (TICK BOX)

- [ ] NEW BUILDING – include dwelling added, exclude domestic garages
- [ ] FOUNDATIONS ONLY
- [x] ALTERED, REPAIRED, EXTENDED – include conversions and resited buildings
- [ ] NEW CONSTRUCTION OTHER THAN BUILDINGS – include demolitions
- [ ] DOMESTIC GARAGES AND DOMESTIC OUTBUILDINGS

FEES APPLICABLE

Building Permit	$ 27 50	Water Connection	$
Street Damage Deposit	$	Vehicle Crossing Levy	$
Building Research Levy	$ 1 00	M.S. Plumbing	$
Plumbing	$		$
Drainage	$ 3 00		$
Sewer Connection	$	TOTAL:	$ 36 50

Receipt No.

Date of Payment 10/10/80

Authorised Officer

Special Conditions:

Application No: 2911

23-9-80

Date Inspected	REMARKS (e.g. stage reached with work)

COUNTY OF STRATHALLAN

BUILDING PERMIT APPLICATION FORM

Application No: ...2911.....
Date Received: ...23-9-80...
...23..... 19 .....

The Building Inspector,
Strathallan County Council,
P.O. Box 56,
TIMARU.

Dear Sir

I hereby apply for permission to/~~erect/alter~~/extend/~~relocate or~~ repair (delete as required).

Type (dwelling, etc) ....DWELLING.....
for (owner of building) .....DEXTER M ALLAN.....
at (address) .....18 TURNBULL ST PAREORA.....
according to locality plan and detailed plans, elevations, cross-sections and specification of building deposited herewith, in duplicate.

Description of land on which building is to be erected:
Valuation Assessment Number: .....24600/195/01.....
Lot Number: ..4..... D.P.: 28606.....
Section: ..... Blocks: III..... S.D.: .....Patiti.....
Property Owner: ....DEXTER M ALLAN.....
Materials: Foundations: ..CONCRETE..... Floor: ...CONCRETE.....
Walls: ...WOOD & ROUGH CAST ..... Roof: ...IRON.....
Area Ground Floor: ..... sq.m. Area of other Floors ..... sq.m.
Estimated Value:

Buildings	$6500:
Plumbing and Drainage ...	$:
	$6500:

Proposed purposes for which every part of building is to be used or occupied:-
.....DWELLING.....

Yours faithfully,
.....DEXTER M ALLAN..... Builder (Print Name)
.....D M Allan..... Signed
.....18 TURNBULL ST..... Address
.....PAREORA.....

Separate Applications must be made for:-

(a) Footpath or street use, if required for scaffolding etc,
(b) Drainage and plumbing work.
(c) Water Supply and Sewerage Scheme connections.

Registered Plumber/Drainlayer employed .....
If Plumbing and/or Drainage work is involved, this application must be accompanied by a separate Plumbing and Drainage Application. All enquiries regarding this application should be directed to the Building Inspector. All notices and correspondence will be sent to the builder unless otherwise specified.

NOTE: No fees are to be submitted with this application. No work may be carried out before a permit is issued.

OFFICE USE ONLY

Recorded: ..... Date: .....

Estimated Value - per sq.m. .... Area: $

Fees: - Research Levy ... ... $:
Building Fee ... ... $:
Sewer Connection ... ... $:
Water Service ... ... $:
Storm Water Drain ... ... $:
Permanent Vehicular Crossing (.....) $:
Extraordinary Water Charge ... ... $:
Total $:

	CHECKED:	DATE:	CONDITIONS:
Structure & Plans	RVM	23-9-80	
Specification	RVM	✓	
Drainage			
Sewerage			
Water	✓		
Town Planning			

DATE:

Further information requested:-

Further information received:-

Approved - Chief Engineer:- 22.9.80

Advice of Approval sent No:-

Fees Paid - Receipt No:-

Permit Issued No:-

And one set of Approved Plans returned.

COUNTY OF STRATHALLAN

APPLICATION FOR PERMIT FOR SANITARY PLUMBING OR DRAINAGE WORK

Application No: 2911

Date Received: 8-10-80

..... 19 .....

The Health Inspector
Strathallan County Council
P.O. Box 56
TIMARU

Dear Sir

I hereby apply for permission to carry out the work described herein.

Type of Work: .....

for (owner of building) ..DEXTER M. ALLAN.....

at (address) .....18 TURNBULL ST. PAREORA.....

according to locality plan and detailed plans, and specification deposited herewith, in duplicate.

Description of Land on which work is to be carried out.

Valuation Assessment Number .....

Lot No.: ..... D.P.: .....

Section: ..... Block: ..... S.D.: .....

Property Owner: .....

Water Supply Available: (give details)

.....DOWNLANDS.....

.....

Method of disposal of effluent from septic tank: .....

Effective Area available for effluent disposal: ..... sq. m

Method of disposal of household drainage: .....

Value of proposed work including labour charges only.

Drainage .....Fifty dollars $50

Plumbing .....Twenty " $20

Total .....

Shifting gully Tap and waste Pipes To outside Building

Craftsman Plumber: ..S.R. Calvert.....

Address: ....Kingsdown RD.1 Timaru.....

Registered Drainlayer: .....

Address: .....

Signed: S.R. Calvert..... Craftsman Plumber ~~or Registered Drainlayer~~

NOTE: Detailed PLANS IN DUPLICATE must accompany this application. Plans must be signed by the Person lodging same. Fees must not accompany the Application. No work may be carried out until after the permit has been issued.

FOR OFFICE USE ONLY

Health Inspector's Report

I have to advise that I have made an inspection of the above property and report as follows:-

(1) I recommend/~~do not recommend~~ that this application be approved.

(2) Septic tank conditions apply. Yes

(3) ....Extention of ~~[illegible]~~ building to be not less than 3 metres from septic tank.....

....

....

....

....

....

County Health Inspector ......[signature]...... Date 10-10-80

		Fees
Value - Drainage	$	1:00
Plumbing	$	1:00
Water Supply Connection	$	:
Sanitory Drainage Connection	$	:
....	$	:
....	$	:
	$	2:00

Approved ......[signature]...... Chief Engineer ....10.10.80.... Date

Advice of Approval sent No. ....2530.... ....10-10-80.... Date

Fees Paid - Receipt No: ....1341.... .... Date

Permit Issued No: ....5.... ....31-10-80.... Date

And one set of Approved Plans returned.

No

STRATHALLAN COUNTY COUNCIL

20 ELIZABETH STREET,
TIMARU,
NEW ZEALAND,
P.O.BOX 56,
TELEPHONE 89-153.

B10/7

26-9- 1980

Dear Sir ~~or Madam~~

BUILDING PERMIT APPLICATION NO. 2911

OWNER. Dexter Allan

In accordance with Clause 3.9.1. of the N.Z.S.S. 1900 Chapter 2: 1964, (Building By-Law), I have to advise you that the approval of the above application has been withheld. This action has been taken for the reasons set out below. Please arrange to supply the necessary information or amend the drawings and/or specifications as necessary. When the necessary information and amendments have been supplied to my satisfaction approval for issue of a permit will be granted.

Under no circumstances may any building work be carried out until the permit has been issued.

Reasons for withholding issue of permit:-

Please arrange for Drainage & Plumbing application to be made for proposed Dr. P.

If you require any further information please contact the Building Inspector at the County Office between 8.30 and 9.30 a.m. Mondays to Fridays.

A copy of this letter has been sent to the owner.

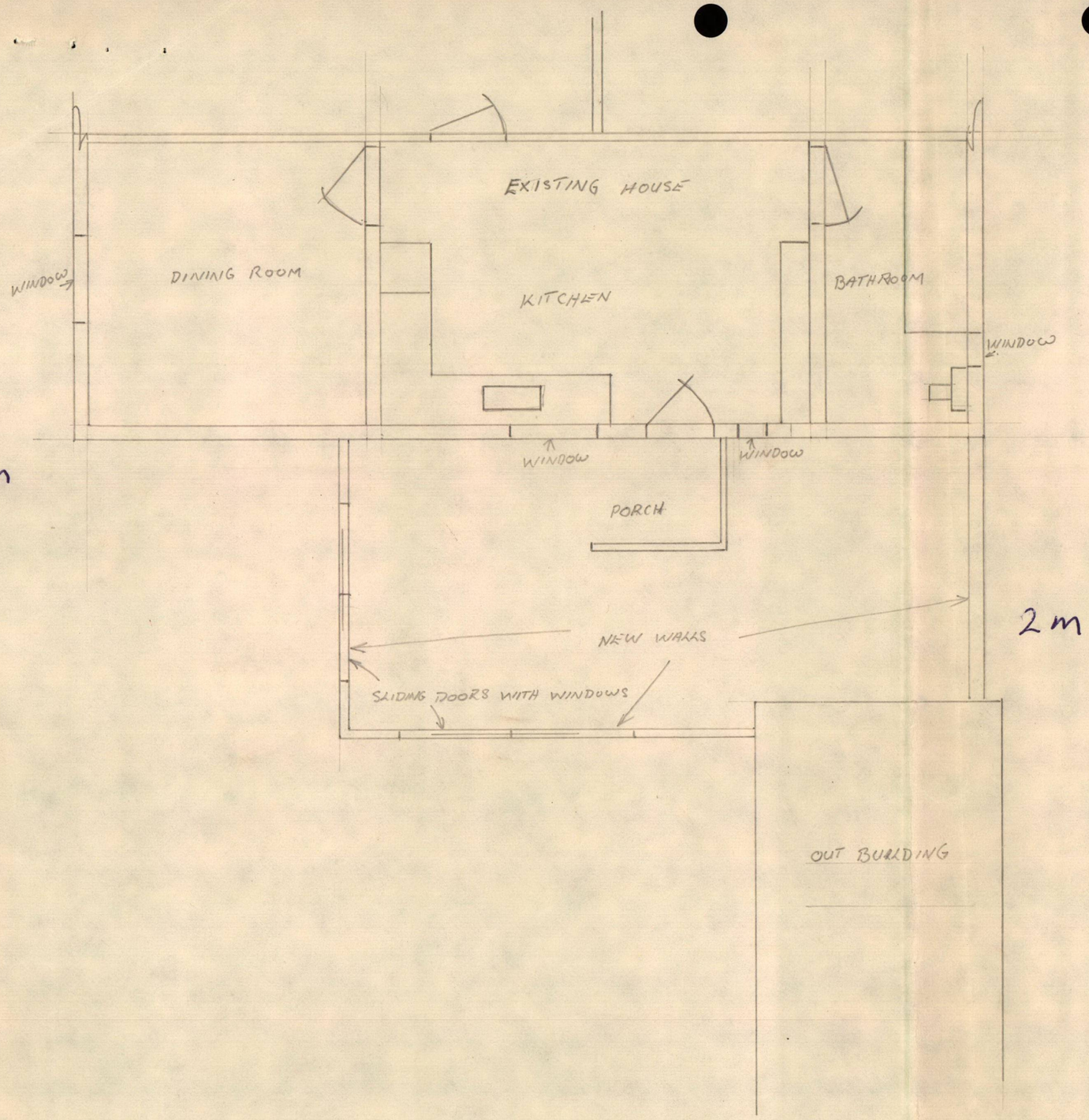
Yours faithfully

L.J.S. BAKER
CHIEF ENGINEER

COPY FOR YOUR INFORMATION

OWNER

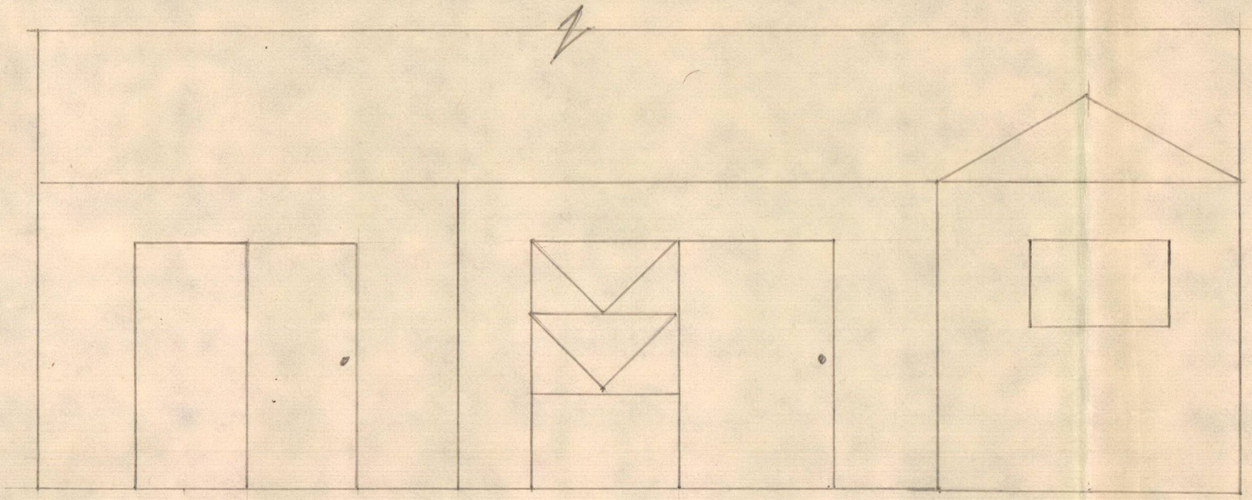
PER: A. J. Dunn
BUILDING INSPECTOR



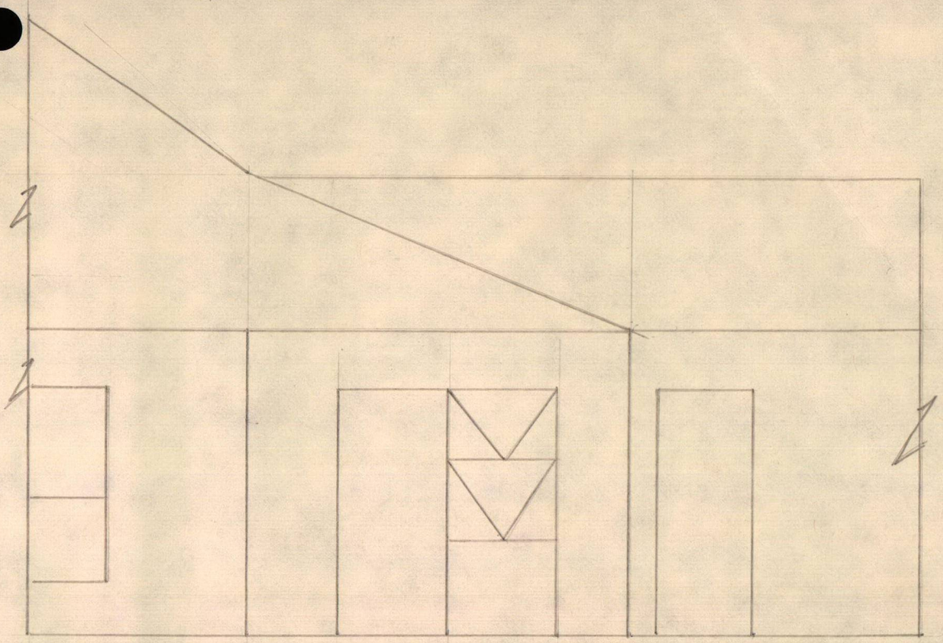
SCALE 1:5

PROPOSED ALTERATION FOR MR: MRS D ALLAN

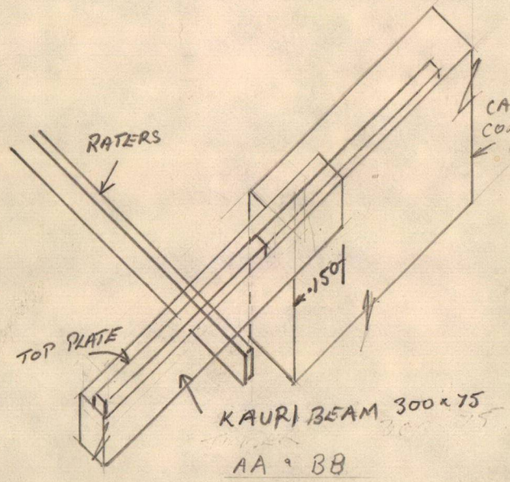
SHEET 1



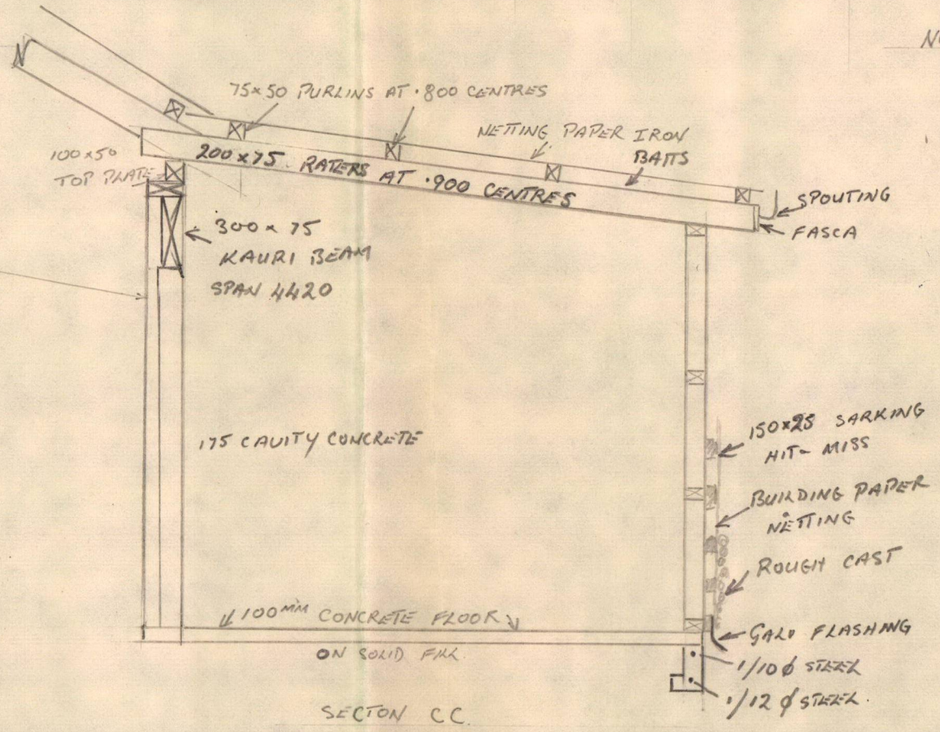
WEST



NORTH



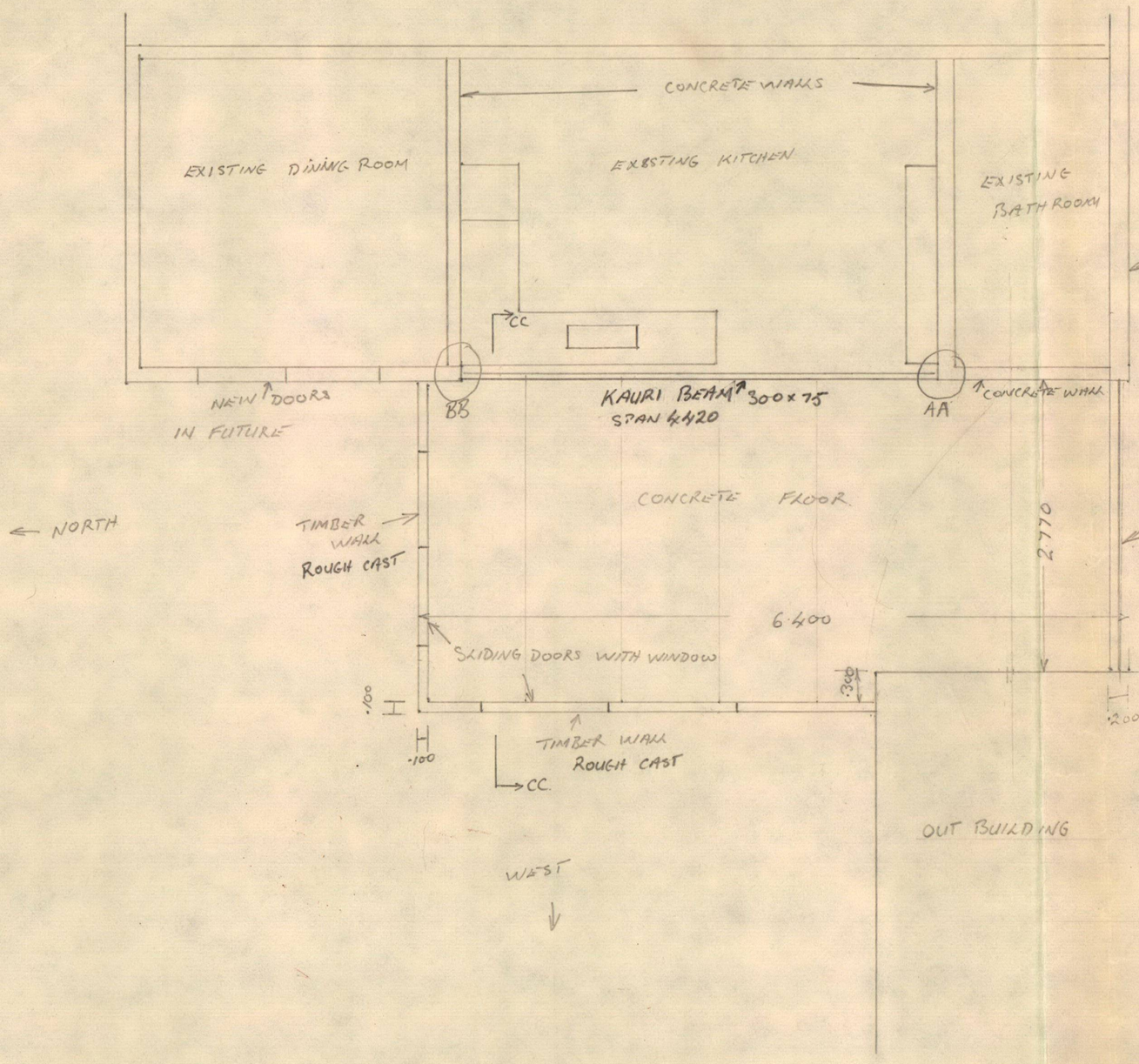
AA • BB

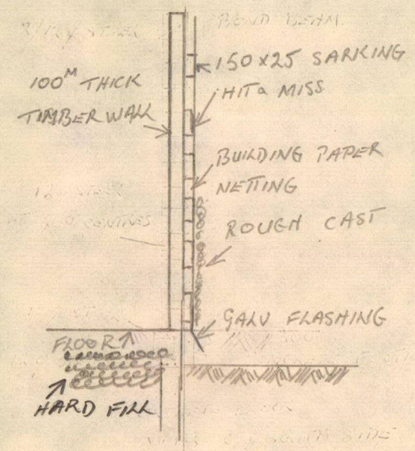


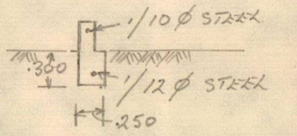
SECTON CC.

NOT TO SCALE

PROPOSED ALTERATION FOR MR. MRS D ALLAN







FOOTING FOR TIMBER WALL

SCALE 1:5

PROPOSED ALTERATION FOR MR - MRS D ALLAN

SHEET 2