

NELSON CITY COUNCIL

BUILDING APPLICATION FORM

To the City Engineer,  
NELSON.

Sir,

No. 3051916

Date 16 Oct 69

I hereby apply for permission to

erect  
alter  
convert  
reinstall  
demolish

Retaining wall 54' from

4 ft. to 12" High with 18" footing as water Table.

for Mr. M. J. J. of 6 Gsel place.

according to locality plans, detailed plans, elevations, cross sections and specifications of building deposited herewith, IN DUPLICATE.

PARTICULARS OF LAND:—

Lot 9 D.P. 5508 Section 49 Blk. Substr.  
Street No. 6 Gsel place Street.  
(If allotted)

Frontage Area

PARTICULARS OF BUILDING:—

Foundations Walls Roof

Area of Ground Floor square feet.

Area of Outbuildings square feet.

ESTIMATED COST:—

Plumbing and Drainage \$

Building \$

Total \$ 300.00.

Purpose for which building is to be used

Builder R M Way

Address 201 Amesbrook Drive

Nelson

Signature of Builder

For Office Use ONLY

Builder's Plan & Specifications Permit Fee \$2

Subdivision Plan

Block Plan Application No.

Index Plan No.

Date: 22 / 10 / 19 69

172321

U

PERMIT FEE \$2.00

2nd copy plans detached ☐

NELSON CITY COUNCIL

Prelim Check  
No. \_\_\_\_\_

16<sup>th</sup> Oct. 69 date

BUILDING INSPECTION SHEET

Locality: 6 Joel Place

Application for: Erection of a retaining wall.

owner: M. Ivory

Builder: R M Way

|                                        |                          |                                         |                          |   |          |
|----------------------------------------|--------------------------|-----------------------------------------|--------------------------|---|----------|
| A                                      |                          | LEGAL                                   | Does not comply          | A | Approved |
| 1. Application form completed.         | <input type="checkbox"/> | 5 Party wall registered                 | <input type="checkbox"/> |   | cf       |
| 2. Street number allocated.            | <input type="checkbox"/> | 6 Approved subdivision scheme pegged    | <input type="checkbox"/> |   |          |
| 3. Building on Council land or street. | <input type="checkbox"/> | 7 Special conditions on specific sites. | <input type="checkbox"/> |   |          |
| 4. Building line restriction           | <input type="checkbox"/> | 8 Occupation of streets & footpaths.    | <input type="checkbox"/> |   |          |

|                                                          |                          |                                             |                          |   |    |
|----------------------------------------------------------|--------------------------|---------------------------------------------|--------------------------|---|----|
| B                                                        |                          | TOWN PLANNING                               |                          | B |    |
| 1. Zoning and use                                        | <input type="checkbox"/> | 6 Accessory buildings: height, siting       | <input type="checkbox"/> |   | cf |
| 2. Yards; front, sides, rear; eaves.                     | <input type="checkbox"/> | coverage, distance to neighbours dwelling.  | <input type="checkbox"/> |   |    |
| 3. Coverage and density                                  | <input type="checkbox"/> | 7 Off street parking, future garage         | <input type="checkbox"/> |   |    |
| 4. Height: general, com. streets, fences, special areas? | <input type="checkbox"/> | sites on Residential sites.                 | <input type="checkbox"/> |   |    |
| 5. Formation width: access to rear sites                 | <input type="checkbox"/> | 8 Method of joining household units.        | <input type="checkbox"/> |   |    |
| For Res. buildings of more than 6 h/u.                   | <input type="checkbox"/> | 9. Verandahs; general & commercial streets. | <input type="checkbox"/> |   |    |

|                                                 |                          |                                                |                          |   |    |
|-------------------------------------------------|--------------------------|------------------------------------------------|--------------------------|---|----|
| C                                               |                          | FIRE REQUIREMENTS                              |                          | C |    |
| 1. Fire Risk Area                               | <input type="checkbox"/> | 6 Fire rating structural frames                | <input type="checkbox"/> |   | cf |
| 2. Classification of occupancy, Type Constr.    | <input type="checkbox"/> | 7 Fire rating of floors                        | <input type="checkbox"/> |   |    |
| 3. Fire Compartment size, exceptions to areas.  | <input type="checkbox"/> | 8 Separation of occupancies                    | <input type="checkbox"/> |   |    |
| 4. External walls, parapets, omission of walls  | <input type="checkbox"/> | 9 Roof space restriction                       | <input type="checkbox"/> |   |    |
| 5. % of openings in walls, fire windows & doors | <input type="checkbox"/> | 10 Special requirements for places of assembly | <input type="checkbox"/> |   |    |
|                                                 |                          | 11 Surface finish walls & ceilings             | <input type="checkbox"/> |   |    |

|                                                          |                          |                                    |                          |   |    |
|----------------------------------------------------------|--------------------------|------------------------------------|--------------------------|---|----|
| D                                                        |                          | EGRESS                             |                          | D |    |
| 1. Units of width of exitway required                    | <input type="checkbox"/> | 5 Internal and external stairways  | <input type="checkbox"/> |   | cf |
| 2. Number of exitways & arrangement                      | <input type="checkbox"/> | 6 Protection of exitways           | <input type="checkbox"/> |   |    |
| 3. Cul-de Sacs                                           | <input type="checkbox"/> | 7 Places of assembly & multi-units | <input type="checkbox"/> |   |    |
| 4. Types of exitways & door openings in line with egress | <input type="checkbox"/> |                                    |                          |   |    |

|                                              |                          |                   |                          |   |    |
|----------------------------------------------|--------------------------|-------------------|--------------------------|---|----|
| E                                            |                          | BYLAWS (General)  |                          | E |    |
| 1. Signs: Size, height above G.L. projection | <input type="checkbox"/> | - skysigns        | <input type="checkbox"/> |   | cf |
| height above building.                       | <input type="checkbox"/> | Hoardings         | <input type="checkbox"/> |   |    |
| Electric signs - Effect on traffic.          | <input type="checkbox"/> | 2. Poultry houses | <input type="checkbox"/> |   |    |
| Flashing signs - zone.                       | <input type="checkbox"/> | 3. Aviaries       | <input type="checkbox"/> |   |    |

|                                        |                                     |                                           |                                     |   |             |
|----------------------------------------|-------------------------------------|-------------------------------------------|-------------------------------------|---|-------------|
| F                                      |                                     | BUILDING BYLAWS                           |                                     | F |             |
| 1. Use                                 | <input checked="" type="checkbox"/> | 6 Value                                   | <input checked="" type="checkbox"/> |   | G. B. C. b. |
| 2. Minimum floor area for rooms        | <input type="checkbox"/>            | 7 Heating                                 | <input type="checkbox"/>            |   |             |
| 3. Combination for rooms in house/unit | <input type="checkbox"/>            | 8 Capacity Electric H.W. Cylinder.        | <input type="checkbox"/>            |   |             |
| 4. Light and ventilation               | <input type="checkbox"/>            | 9 Notification D.G. Insp. Central Heating | <input type="checkbox"/>            |   |             |
| 5. General Construction                | <input checked="" type="checkbox"/> |                                           |                                     |   |             |

|                                             |                          |                                                 |                          |   |    |
|---------------------------------------------|--------------------------|-------------------------------------------------|--------------------------|---|----|
| G                                           |                          | HEALTH & PLUMBING & DRAINAGE                    |                          | G |    |
| 1. General Plumbing                         | <input type="checkbox"/> | 6 Drainage                                      | <input type="checkbox"/> |   | cf |
| 2. Number of sanitary fittings              | <input type="checkbox"/> | 7 Stormwater drains                             | <input type="checkbox"/> |   |    |
| 3. Isolation of W.C. compartments           | <input type="checkbox"/> | 8 Drains under buildings                        | <input type="checkbox"/> |   |    |
| 4. Lighting & Ventilation of W.C.s, Urinals | <input type="checkbox"/> | 9 Septic tank approval                          | <input type="checkbox"/> |   |    |
| 5. Buildings Compliance with Health Act.    | <input type="checkbox"/> | 10 Copy of Health Dept's approval (Offensive T) | <input type="checkbox"/> |   |    |

|                    |                          |                                          |                          |   |    |
|--------------------|--------------------------|------------------------------------------|--------------------------|---|----|
| H                  |                          | DANGEROUS GOODS                          | REFER TO                 | H |    |
| 1. Safety distance | <input type="checkbox"/> | 3 General Compliance                     | <input type="checkbox"/> |   | cf |
| 2. Filling points  | <input type="checkbox"/> | 4 Copy Chief Insp of Explosives approval | <input type="checkbox"/> |   |    |

|                                          |  |                     |  |   |  |
|------------------------------------------|--|---------------------|--|---|--|
| I                                        |  | ACCESSWAYS & LEVELS |  | I |  |
| Accessways: -                            |  | 2. levels: floor    |  |   |  |
| Crossings: number width design, location |  | Kerb                |  |   |  |
| Formation: grade design location         |  |                     |  |   |  |

|   |  |                       |  |   |  |
|---|--|-----------------------|--|---|--|
| J |  | WATERWAY & PIPE SIZES |  | J |  |
|---|--|-----------------------|--|---|--|

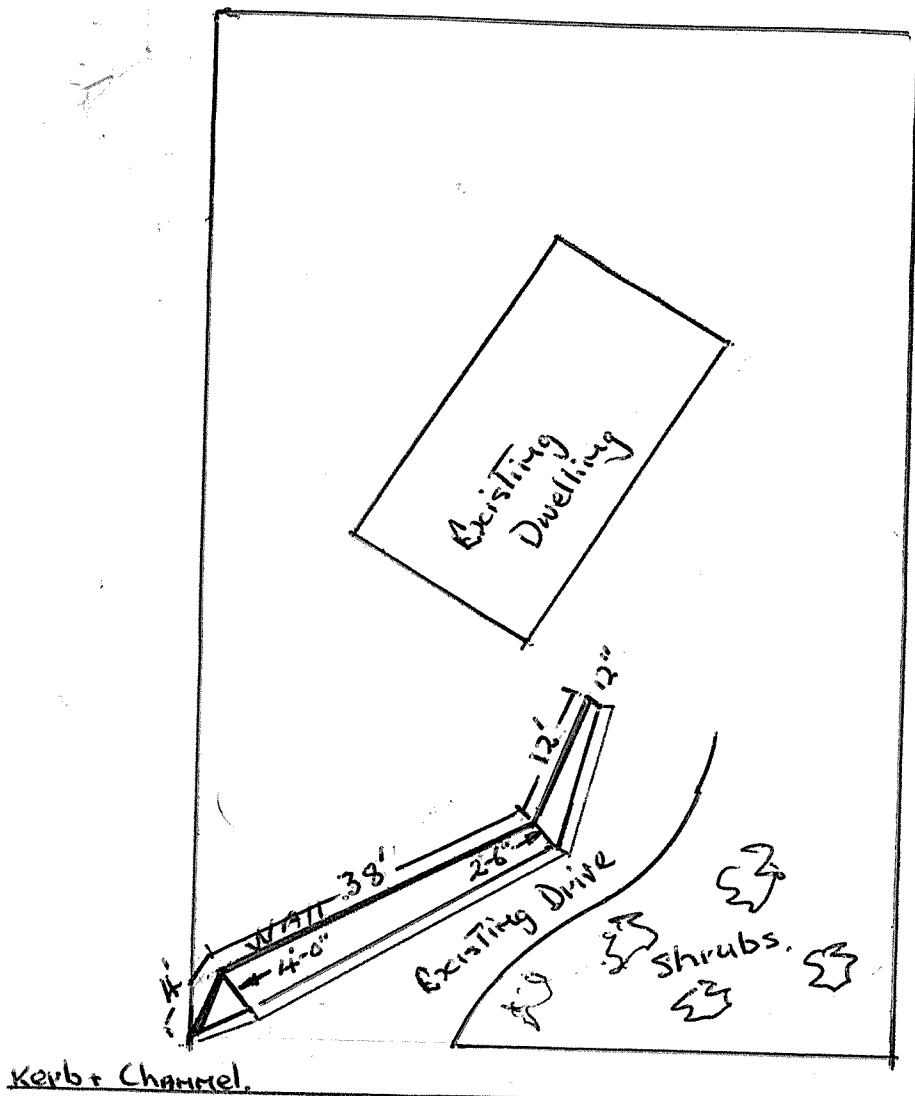
|   |  |                                   |  |   |  |
|---|--|-----------------------------------|--|---|--|
| K |  | STRUCTURAL (Wall design No below) |  | K |  |
|---|--|-----------------------------------|--|---|--|

|   |  |                    |  |   |  |
|---|--|--------------------|--|---|--|
| L |  | CHIEF FIRE OFFICER |  | L |  |
|---|--|--------------------|--|---|--|

|   |  |                        |  |   |  |
|---|--|------------------------|--|---|--|
| M |  | ELECTRICITY DEPARTMENT |  | M |  |
|---|--|------------------------|--|---|--|

|                                                                                                  |  |                                                                  |
|--------------------------------------------------------------------------------------------------|--|------------------------------------------------------------------|
| COUNCIL DISPENSATION                                                                             |  | PERMIT MAY BE ISSUED                                             |
| date granted _____                                                                               |  |                                                                  |
| Conditions if any complied with <input type="checkbox"/>                                         |  |                                                                  |
| ISSUING OFFICER TO NOTIFY OWNER of advisability of submitting proposal to                        |  |                                                                  |
| Waimea Elect. P.B. <input type="checkbox"/> Labour Dept. <input type="checkbox"/> Notified _____ |  | N.C.C. wall design No _____ Plan issued <input type="checkbox"/> |





Kerb + Channel.

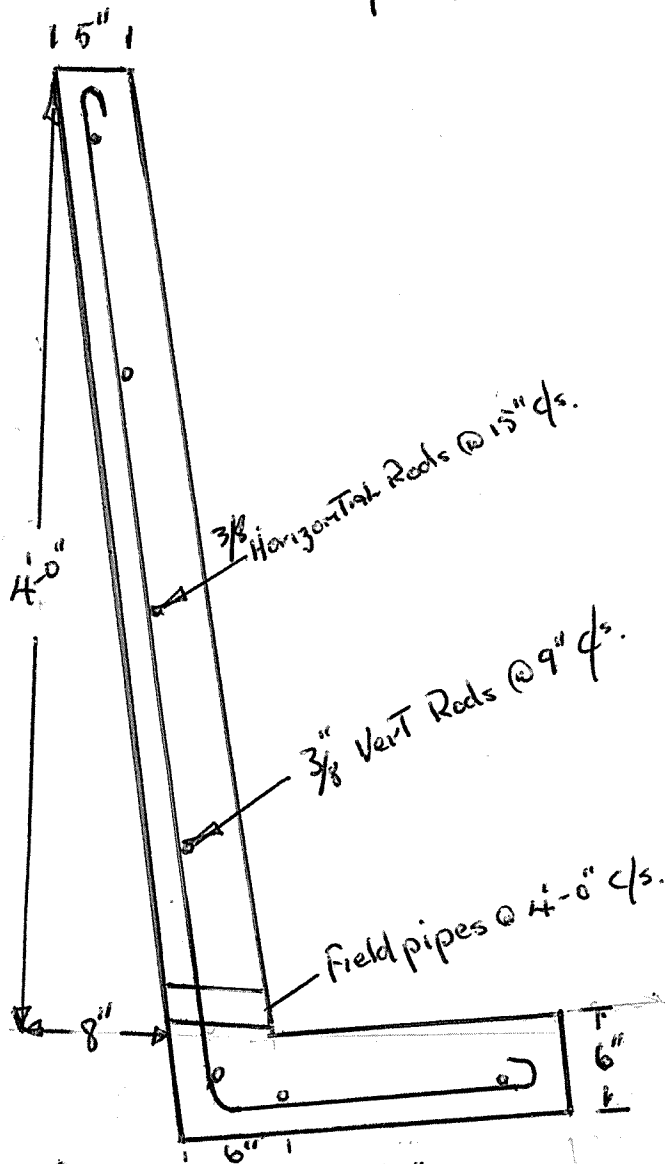
Isel. Place.

Lot. 9

Dp 5508.

Sec 49

Sub Sth.



Cross Sec. at 4'-0"

Proposed. retaining wall for Mr M Guory Mo 6. Isel Place