

Application for code compliance certificate



Section 92 (Building Act 2004)

*Mandatory fields to be completed

The building consent

*Building consent number: BCO 10260425 *Date granted: 19.2.18
*Street address of building: 362 Matakana Valley Road Matakana 0985

Issued by: Auckland Council

Current lawfully established use:

The compliance schedule (only complete this section if the buildings has had specified systems installed or removed)

No. of occupants per level, and per use if more than 1:

Compliance schedule: ☐ New ☐ Amendment Ex. compliance schedule No.

Year first constructed:

The owner

*Name of owner: (Include preferred form of address e.g. Mr, Dr if an individual) Three Blokes limited

*Contact person: (Insert n/a if the applicant is an individual) Dean Munro

*Mailing address: 326 Matakana Valley Road Matakana Postcode: 0985

Street address / registered office: Postcode:

*Phone number: Work After hours:

Facsimile number: *Mobile: 027 2836448

*Email address: deankim@extra.co.nz Website:

*The following evidence of ownership is attached to this application:

☐ Certificate of Title ☐ Lease agreement ☐ Sale & Purchase agreement ☐ Other document showing full name of legal owners of the building

Note only required if ownership has changed since the application for building consent was made: Ownership changed: ☐ Yes ☒ No

Agent: (only required if application is being made on behalf of the owner)

*Name of Agent: ~~Grant~~ Dobbyn Builders Ltd

*Contact person: Grant Dobbyn

*Mailing address: ~~362~~ P.O Box 504 Warkworth Postcode:

Street address / registered office: Postcode:

*Phone number: Work After hours:

Facsimile number: *Mobile: 0274757026

*Email address: grantdobbyn@gmail.com Website:

*Relationship to owner: Builder

(supply details of authorisation from the owner to make the application on the owner's behalf)

The applicant (only required where sale and purchase agreement in place or certificate of title has not been issued)

*Name of Applicant:

*Contact person:

*Mailing address: Postcode:

Street address / registered office:

*Phone number: Work After hours:

Facsimile number: *Mobile:

*Email address: Website:

*Relationship to owner:

(supply details of authorisation from the owner to make the application on the owner's behalf)

First point of contact for communications with Council / Building Consent Authority

*Full name: Grant Dobbyn
 *Mailing address: P.O. Box 504 Warkworth Postcode: _____
 *Phone number: _____ *Mobile: 0274757026
 Facsimile number: _____ *Email address: grantdobbyn@gmail.com
 *Preferred method of correspondence: Email: ☒ Post: ☐

The personnel of licensed building practitioners (LBP) who carried out or supervised the restricted building work are as follows, continue on another page if necessary (applies as of 1 March 2012) (list names, addresses, telephone numbers, and (where relevant and if not provided above) licensed building practitioner numbers or Plumbers, Gasfitters and Drainlayers Board registration numbers)

Designer or Architect	Structural Engineer
Name: <u>Campbell Registered Architects Ltd</u>	Name: _____
Address: <u>202 Camer Rd, P.O. 5, Welbford</u>	Address: <u>154 Centreway Rd Orewa</u>
Daytime: <u>094315580</u> After Hours: _____	Daytime: <u>094265702</u> After Hours: _____
Mobile: <u>0274323185</u> Fax: _____	Mobile: _____ Fax: _____
Registration or LBP Registration No: _____	Registration or LBP Registration No: <u>63973</u>

Head Contractor / Site Manager	Building / Carpentry work
Name: <u>Grant Dobbyn</u>	Name: <u>Dobbyn Builders Ltd</u>
Address: <u>448 Wright Rd Matakana</u>	Address: <u>448 Wright Rd Matakana</u>
Daytime: _____ After Hours: _____	Daytime: _____ After Hours: _____
Mobile: <u>0274757026</u> Fax: _____	Mobile: <u>0274757026</u> Fax: _____
LBP Registration No: <u>BP115470</u>	LBP Registration No: <u>BP115470</u>

Drain layer	Plumber
Name: <u>Rick Chapman</u>	Name: <u>Rick Chapman</u>
Address: <u>P.O. Box 28 Matakana</u>	Address: <u>P.O. Box 28 Matakana</u>
Daytime: _____ After Hours: _____	Daytime: _____ After Hours: _____
Mobile: <u>0274885853</u> Fax: _____	Mobile: <u>0274885853</u> Fax: _____
Registration No: <u>11449</u>	Registration No: <u>11449</u>

Electrician	Gas Fitter
Name: <u>Steve Grimmer</u>	Name: _____
Address: <u>21 Morrison Dr Warkworth</u>	Address: _____
Daytime: _____ After Hours: _____	Daytime: _____ After Hours: _____
Mobile: <u>094258339</u> Fax: _____	Mobile: _____ Fax: _____
Registration No: <u>E246206</u>	Registration No: _____

Foundation work	Bricklaying
Name: <u>Dobbyn Builders Ltd</u>	Name: _____
Address: <u>448 Wright Rd Matakana</u>	Address: _____
Daytime: _____ After Hours: _____	Daytime: _____ After Hours: _____
Mobile: <u>0274757026</u> Fax: _____	Mobile: _____ Fax: _____
LBP Registration No: <u>BP115470</u>	LBP Registration No: _____

• Blocklaying

Name: <u>elwe wood</u>	External plastering
Address: <u>28 Hill street Warkworth 0910</u>	Name:
Daytime:	After Hours:
Daytime:	After Hours:
Mobile: <u>02751353</u> Fax:	Mobile:
Mobile:	Fax:
LBP Registration No: <u>BP115</u>	LBP Registration No:

Roofing work

Name: <u>Dobbyn Builders Ltd</u>	Other
Address: <u>448 Wright Rd Matukana</u>	Name:
Daytime:	After Hours:
Daytime:	After Hours:
Mobile: <u>0274757026</u> Fax:	Mobile:
Mobile:	Fax:
LBP Registration No: <u>BP 115470</u>	LBP Registration No:

The building contains the following specified systems:

(Only complete this section if the building has had specified systems installed or removed during construction)

NB: If there are no specified systems in this building, please go to the last page and complete application.

Key to type of compliance schedule:	☐ New building - new compliance schedule ☐ Existing building with compliance schedule - amended compliance schedule ☐ Existing building no previous compliance schedule - new compliance schedule					
	Definition of terms	New	A new system or feature is being installed into a new building or a compliance schedule is being applied for the first time, for an existing building which has specified systems installed in it			
		Altered	An existing system or feature is being modified, altered or added to an existing building resulting in an amendment to an existing compliance schedule			
		Removed	A system or feature is being removed from the building			
Specified system		Inspection, maintenance & reporting standards (please list standard if not referenced)		(tick as applicable)		
				New	Altered	Removed
1	Automatic systems for fire suppression					
1.1	Sprinkler system	☐ NZS4541:2013 ☐ NZS4515:2009 ☐ NFPA25 ☐	☐	☐	☐	
1.2	Gas and foam flood or deluge systems; dry and wet fire extinguishing systems	☐ NZS4541:2013 ☐ NZS4515:2009 ☐ NFPA25 ☐	☐	☐	☐	
2	Automatic or manual emergency warning systems for fire or other dangers					
2.1	Manual and automatic fire alarms; smoke / heat detectors; gas; radiation systems ☐ Audible ☐ Visual	☐ NZS4512:2010 ☐ AS1851:2005 ☐ NFPA25 ☐	☐	☐	☐	
2.2	Automatic gas leak detection systems for the detection and measurement of combustible gases	☐ NZS5263:2003 ☐	☐	☐	☐	
3	Electromagnetic or automatic doors or windows					
3.1	Automatic doors e.g. sliding or revolving doors Are doors interfaced with emergency warning system? ☐ Yes ☐ No	☐ NZS4239:1993 ☐	☐	☐	☐	
3.2	Access controlled doors (swipe card, key pad, sensor-delayed egress, etc)	☐ NZS4239:1993 ☐	☐	☐	☐	
3.3	Interfaced fire or smoke door or windows (electromagnetic door holders)	☐ AS4178:1994 ☐ NZS4232.2:1998 ☐ NZS4520:2010 ☐	☐	☐	☐	

Billing

*All related invoices/refunds to be billed to: ☒ Owner ☐ Agent ☐ Applicant

*Preferred method of billing: Email: ☒ Post: ☐

AC2132 Authority to refund fees associated with a building consent to another person can be used to authorise Council to refund payments to another person.

Purchase order / Reference number: (if applicable) _____

Please note: any refunds are paid to the receipted name unless written authorization has been received from the receipted person or company stating otherwise.

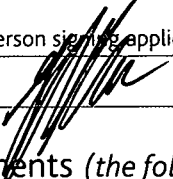
Application

All building work to be carried out under the building consent specified on this form was completed on 4.7.18

☒ *I request that you issue a code compliance certificate for this work under section 95 of the Building Act 2004

*The code compliance certificate should be sent to: ☒ Owner ☐ Agent

*Name of person signing application: _____

*Signature: 

☐ Owner ☒ Agent

Date: 8.7.18

Attachments (the following documents are attached to this application)

☒ Certificates from the personnel who carried out the work

☒ Memoranda from licensed building practitioners stating what restricted building work they carried out or supervised

☒ Certificates that relate to the energy work (e.g. gas and electrical certificates)

☐ Evidence that specified systems are capable of performing to the performance standards set out in the building consent

Comments

Office only use

Receipt No:	
Deposit \$:	
CS No:	
Date:	

Area Office		
☐ Central	☐ Henderson	☐ Orewa
☐ Papakura	☐ Pukekohe	☐ Takapuna
☐ Manukau	☐ Compass	☐ MBC
☐ Professional		