

Manawatu-Wanganui Regional BCA Cluster

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Wanganui District Council	101 Guyton Street	PO Box 637	Wanganui 4500	06 349 0001	wdc@wanganui.govt.nz

**BUILDING CONSENT/PIM APPLICATION FORM
TO INSTALL A SOLID FUEL HEATING APPLIANCE
Section 33 and/or 45, Building Act 2004**

Ref: T-Form 2(b)
Cluster Version: CV 2
Issued: 4 April 2016

OFFICE USE ONLY

Valuation Number:	
BC Reference Number:	
Date Application Received:	
Building Category:	

SECTION 1

APPLICATION TYPE

I request the Council to issue a:	<input type="checkbox"/> Property Information Memorandum <input type="checkbox"/> Building Consent <input type="checkbox"/> Amendment to a Building Consent
Value of the solid fuel appliance and installation (inc GST)	\$

SECTION 2

BUILDING

Street address of building:	
Legal description of land where building is located: <i>(state legal description as at the date of application and, if subdivision is proposed include details of relevant lot numbers and subdivision consent)</i>	
Lot:	
DP:	
Sec No:	
Blk No:	
Blk Name:	
Val No:	
Building name: <i>(if applicable)</i>	
Location of building within site/block:	
Number of levels:	
Level/Unit number:	

SECTION 3**OWNER**Name of owner(s): *(eg Mr, Mrs, Miss, Ms)*

Contact person(s):

Mailing address:

Postcode:

Owner(s) contact details:

Landline:

Mobile:

Daytime:

After hours:

Fax:

Website:

Email:

Evidence of Ownership: *(Please attach one of the following, as appropriate to the circumstances, showing full name of legal owner(s) of the building/land)*

Rates Demand	Comments	Agreement for sale and purchase	Comments	Certificate of Title	Comments

Payment in Full:

Receipt Number:

SECTION 4**AGENT acting lawfully on behalf of the owner** *(only required if application is made on behalf of the owner)*

Name of Agent(s) and Contact Person:

Mailing address:

Postcode:

Agent(s) contact details:

Landline:

Mobile:

Daytime:

After hours:

Fax:

Website:

Email:

First Point of Contact for Communication with the Council/Building Control Authority: *(mark boxes as appropriate and provide details of any other points of contact not already shown)*

Further information:	Agent	<input type="checkbox"/>	Owner	<input type="checkbox"/>	Other	<input type="checkbox"/>
Correspondence:	Agent	<input type="checkbox"/>	Owner	<input type="checkbox"/>	Other	<input type="checkbox"/>
Invoicing:	Agent	<input type="checkbox"/>	Owner	<input type="checkbox"/>	Other	<input type="checkbox"/>

Other contact details:

Preferred correspondence:

Fax: Email: Post:

SECTION 5							
PROJECT							
Manufacturer's Name:							
Model:							
Type of Installation							
Free standing	<input type="checkbox"/>	Inbuilt	<input type="checkbox"/>	New	<input type="checkbox"/>	Secondhand (new flue to be installed) To be supported by a certificate from a Qualified Person	<input type="checkbox"/>
Is a wetback being installed?		<input type="checkbox"/> Yes			<input type="checkbox"/> No		
If a new wetback connection is being installed, provide plans and details showing:							
Type and gradient of pipes between wetback and hotwater cylinder (see G12/AS1 Figure 15 or NZS 4603 Part 4)							
Schematic drawing of hotwater system showing:				Tick to confirm included:		Comments:	
<ul style="list-style-type: none"> Open venting (see G12/AS1 Figure 15 or NZS 4603 Part 4) Tempering valve (see G12/AS1 Figure 16) Frost Protection 				<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			
Plumber's Name:							
Plumber's Licence Number:							

SECTION 6							
ATTACHMENTS							
The following plans and specifications are attached to this application (in duplicate): <i>(All plans and specifications must meet the minimum requirements set out in the regulations or required by the Building Consent Authority)</i>							
Manufacturer's specifications/ Installation Instructions:	<input type="checkbox"/>	Ministry for the Environment Approved Woodburner <i>(if site is greater than 2 ha, the woodburner does not require Ministry for the Environment approval)</i>	<input type="checkbox"/>	Wetback details <i>(if applicable)</i>	<input type="checkbox"/>	<ul style="list-style-type: none"> Pipe work, cylinder position Details and registration number of registered plumber undertaking plumbing work 	
Floor plan and smoke detectors in accordance with F7 Clause 3.1 NZ Building Code	<input type="checkbox"/>	If passing through second storey	<input type="checkbox"/>	Seismic restraints	<input type="checkbox"/>	<ul style="list-style-type: none"> Plans must be accurate and clear with all rooms identified Flue and floor protection required Flue height above roof and ridge line 	
Comments:							

SECTION 7							
OWNER DECLARATION							
<i>(I request that you issue a BC and/or PIM for the building work described in this application)</i>							
Owner name:							
Authority to act as agent	I authorise the agent named to sign and act on my behalf in all matters in relation to this building consent	Yes:	<input type="checkbox"/>	No:	<input type="checkbox"/>		
Signature:				Date:			
Agent name:							
Agent signature:				Date:			

SECTION 8
BUILDING CODE COMPLIANCE
CLAUSE *(Identify which clauses will be involved in the building work)*
MEANS OF COMPLIANCE *(Refer to relevant compliance document(s) or detail of alternative solution in the plans and specifications)*
Please tick appropriate box(es)

<input type="checkbox"/> B1 – Structure	<input type="checkbox"/> B1/AS1	<input type="checkbox"/> NZS3604
<input type="checkbox"/> B2 – Durability	<input type="checkbox"/> B2/AS1	
<input type="checkbox"/> C1 to C7 – Fire	<input type="checkbox"/> C/AS1	<input type="checkbox"/> C/VM1
<input type="checkbox"/> E2 – External moisture	<input type="checkbox"/> E2/AS1	
<input type="checkbox"/> F7 – Warning systems	<input type="checkbox"/> F7/AS1	
<input type="checkbox"/> G9 – Electricity	<input type="checkbox"/> G9/AS1	
<input type="checkbox"/> G12 – Water supplies	<input type="checkbox"/> G12/AS1	

ALTERNATIVE SOLUTIONS *(Please provide details below)*
OFFICE USE ONLY (To be completed by Council ONLY)
RESIDENTIAL/COMMERCIAL CONSTRUCTION

		Yes	No	NA
1	Quality of plans acceptable <i>(Graph paper, pencil and single line drawings not acceptable)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	Specifications relevant and comprehensive	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	All rooms clearly identified	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	Smoke detectors shown on plans	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

DECLARATION

		Yes	No	NA
5	Are all sections of the application form completed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	2 copies of plans and specifications and all associated documentation been provided	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	Is the building listed on an historic site in the District Plan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	Vetting completed and application accepted	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9	Reason for decision – correct information provided	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10	Vetting completed and application incomplete	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Reason for decision:

		Yes	No	NA
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11	Application sent back to Agent/Owner	Dated:		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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Name of Vetting Officer:
Signature:
Date:
Guidelines

1	Plans – two copies All plans shall be drawn in black ink. All plans should have a text that is clear and readable. Floor plans shall show the location of the solid fuel appliance and the adjacent rooms. Windows and doors are to be indicated in all of the rooms.
2	Installation instructions –two copies The installation instructions are to be provided for the make and model of the solid fuel heater appliance that is being installed. This will show the clearances required by the manufacturer for that appliance.
3	Other documents Attach any Producer Statement applications. Original copies only will be accepted and they must be completed in full.
4	Fees and charges The cost of this application will be due for payment at the time of lodgement. This will be the only fee charged unless the application and/or development differs from that originally represented or assessed in which case additional fees will be charged.
5	Wetbacks If this application includes a wetback installation, to ensure that the plumbing fittings and fixtures are in accordance with the New Zealand Building Code, the building officials will process the application.
6	Documentation required on completion of installation When the appliance has been installed, an application for Code Compliance Certificate is required.
7	Smoke Detectors Smoke Detectors are to be installed in accordance with F7 Clause 3.1 of the New Zealand Building code before the Code Compliance Certificate is issued.
8	Installation The fire appliance(s) shall be installed to manufacturer's specifications.