







Manawatu-Wanganui Regional BCA Cluster

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OFFICE USE ONLY

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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 1 Issued: 1 September 2015

Valuation Number:	
BC Reference Number:	
Date Application Received:	
Building Category:	
SECTION 1	
APPLICATION TYPE	
	Property Information Memorandum
I request the Council to issue	a: Building Consent
	Amendment to a Building Consent
Value of the solid fuel appliance	and installation (inc GST) \$
SECTION 2	
BUILDING	
Street address of building:	
proposed include details of relevant lot	ilding is located: (state legal description as at the date of application and, if subdivision is
LOT:	numbers and subdivision consenty
DP:	
SEC No:	
BLK No:	
BLK Name:	
VAL No:	
Building name: (if applicable)	
Location of building within site/blo	ck:
Number of levels:	
Level/Unit number:	

SECTION 3							
OWNER							
Name of owner(s): (eg Mr, Mrs, Mis	s, Ms)						
Contact person(s):							
Mailing address:							
Postcode:							
Owner(s) contact details:							
Landline:				Mobile:			
Daytime:				After hours:			
Fax:				Website:			
Email:							
Evidence of Ownership: (Please attack	l ch one of the followir	na. as an	propriate	to the circums	tances.	showina full nam	ne of legal
owner(s) of the building/land)		ig, as ap	propriace	to the cheanns	turrees,	snoving jun nun	ie oj legal
Rates Demand Comments	Agreem	ent for	sale and	Comments		Certificate	Comments
	ı	ourchase	е			of Title	
Payment in Full:							
Receipt Number:							
SECTION 4							
AGENT (Only required if applicat	ion is made on b	ehalf o	f the ow	ner)			
Name of Agent(s) and Contact Person				<u> </u>			
0 1(2)	-						
Mailing address:							
Postcode:							
Agent(s) contact details:							
Landline:				Mobile:			
Daytime:				After hours:			
Fax:				Website:			
Email:							
Relationship to Owner: (State details	l and provide written	authoris	ation froi	m the owner(s)	to mak	e the application	on the
owner(s) behalf)			, ,				
First Point of Contact for Communic provide details of any other points of co			ilding Co	ontrol Author	ity: (m	ark boxes as app	ropriate and
Further information:	Agent		Owner			Other	
Correspondence:	Agent		Owner		<u> </u>	Other	
Invoicing:	Agent		Owner		_	Other	
Other contact details:	0 - 1						
	1						
Preferred correspondence:							
Fax:			Email:				Post:

SECTION 5										
PROJECT										
Manufacturer's Name:										
Model:										
Type of Installation										
Free standing	Inbuilt				New		Secon	dhand/	new flue to	
					1464				new nac to	
	J			_			To be si	upported		
							certifica Person	ite from	a Qualified	
Is a wetback being installe	d?	V			N/	<u>, </u>	reison			
Is a wetback being installed? Yes U No U If a new wetback connection is being installed, provide plans and details showing:										
Type and gradient of pipe			-				5 or NZS 46	03 Part 4)	
Schematic drawing of hote					Tick to confirm include		Comme		<i>,</i>	
Open venting (see 0)	-		_	art 4)						
Tempering valve (s	_			,						
• Frost Protection		-	·							
Plumbers Name:										
Licence Number:										
SECTION 6										
ATTACHMENTS										
The following plans and sp	ecifiaction	s are	attached t	o this	application (in duplicate	e):				
(All plans and specifications must						-	the Building	Consent	t Authority)	
Manufacturer's specification	ns/		Ministry f	or the	Environment		Wetback details (if			
Installation Instructions:			Approved			applicable)				
Appliance Clearances	;			(if site is greater than 2ha, the woodburner does not require			Pipe work, cylinder position			
 Appliance floor prote 	= =			inistry	•		Details a	nd regist	ration	
Appliance flue syster	m type approval			proval)			number	_		
 Roof penetration details 	Roof penetration flashing						plumber undertaking			
							plumbing			
Floor plan and smoke dete				_	second storey . Flue		Seismic R	estraint	S	
- 444			and noor p	nd floor protection required.						
Building Code			Flue height above roof and ridge line.							
Plans must be accurate and clear with all rooms identified										
Comments:										
SECTION 7										
OWNER DECLARATION				,		,				
(I request that you issue a BC	and/or PIM	for t	the building	work d	escribed in this application	n)				
Owner name:							1	I		
Authority to act as agent I authorise the agent named to sign and act on my behalf in all matters in relation to this huilding concent.						II	Yes:		No:	
matters in relation to this building consent										
Signature:							Date:			
Agent name:										
Annatain							D. 1			
Agent signature:							Date:			

SECTI	ON 8								
BUILDING CODE COMPLIANCE									
CLAUS	SE SE		MEANS OF CO)MPLIANCE					
(Identij	fy which clauses will be inv	olved in the	(Refer to releva	nt compliance document(s) o	r detail of alte	rnative	solution	in the	
buildin	g work)		plans and speci		_				
Please	tick appropriate box(e	s)							
	Structure		□B1/ AS1		■NZS3604				
□B2 -	Durability		□B2/AS1						
	C6 – Fire		□C/AS1	[□C/VM1				
	External moisture		□E2/AS1 □C/VM1						
	Warning systems		□F7/AS1						
	- Electricity		□G9/AS1						
	– Water supplies		□G12/AS1						
	NATIVE SOLUTIONS		_012// 101						
	provide details below)								
(, , , , , , , ,	provide details seletif								
05516	E LIGE ONLY								
	E USE ONLY								
	completed by Council (<u> </u>	
RESIDE	NTIAL/COMMERCIAL CON	STRUCTION				Yes	No	NA	
1	Quality of plans acceptab	le (Graph paper,	pencil and sing	le line drawings not acceptab	ıle)				
2	Specifications relevant ar	nd comprehensiv	e						
3	All rooms clearly identifie	•							
4									
	CLARATION							NA	
5	Are all sections of the application form completed								
6	2 copies of plans and specifications and all associated documentation been provided								
7	Is the building listed on an historic site in the District Plan								
8	Vetting completed and application accepted								
9	Reason for decision – correct information provided								
	·								
10	Vetting completed and a	pplication incomp	piete						
	Reason for decision:								
						Yes	No	NA	
11	Application sent back to	Agent/Owner	Dated:						
Name	of Vetting Officer:		•			l.	•		
					5 .				
Signati					Date:				
Guide	lines								
1	Plans – two copies	tal All days the 1d	ha a a la labarda	alana and an adalah bermula and an abadi	ale a la la carte a	. (1	ara 6 al a	.0	
1	and the adjacent rooms. Windo			clear and readable. Floor plans shall to the rooms.	show the location	of the so	olid fuel ap	pliance	
	Installation instructions –tv								
2		•		of the solid fuel heater appliance th	at is being installe	ed. This w	ill show th	ne	
	clearances required by the mar	ufacturer for that ap	pliance.						
3	Other documents Attach any Producer Statement	applications, Origina	l copies only will be	e accepted and they must be comple	ted in full.				
	Fees and charges			, , , , , , , , , , , , , , , , , , , ,					
4			_	ement. This will be the only fee charg	ged unless the app	lication a	nd/or dev	elopment	
	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 proces	s the application.							
6	Documentation required or			- us					
•	When the appliance has been installed, an application for Code Compliance Certificate is required.								
7	Smoke Detectors Smoke Detectors are to be insta	alled in accordance w	ith F7 Clause 3.1 of	the New Zealand Building code befo	ore the Code Com	pliance C	ertificate i	s issued.	
	Installation			2 2 24					

The fire appliance(s) shall be installed to manufacturer's specifications.

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