



RUAPEHU DISTRICT COUNCIL

Private Bag 1001, Taumarunui 3946 Ph. 07 895 8188 Fax. 07 895 3256

APPLICATION FOR A PIM/BUILDING CONSENT

FORM 2

Please Note

All fees must be paid before application can proceed
An incomplete application will be returned.

Sections 33 & 45, Building Act 2004

<i>Office Use Only</i>	Receipt # _____
Ref: _____	File: _____ Doc: _____ Date: _____ Staff Initials: _____

This application is for a:

- Project Information Memorandum (PIM)
- PIM & Building Consent
- Building Consent only

	Date	Number
BC		
PIM		

PROJECT LOCATION

Address: _____
 Legal Description (if known): _____ Valuation No: _____

OWNER OR AGENT DETAILS

Owner (if also agent, tick box)

Name: _____
 Address: _____
 Town: _____
 Phone: _____ Fax: _____
 Cellphone: _____

Agent

Name: _____
 Address: _____
 Town: _____
 Phone: _____ Fax: _____
 Cellphone: _____

Correspondence to: owner or agent

DESCRIPTION OF WORK

e.g. new dwelling, extension to garage.

Ensure that Certificate of Title/s including diagram page no older than 3 months old is included with your application.

PROJECT DETAILS

Project Type: New Building Alteration New Transportable Relocation Demolition

Occupancy: * Number of persons _____ Council Services Connection

Area: Ground Floor _____ sq metres Other Floors _____ sq metres

Intended Use: Industrial * Commercial * Kohanga Reo/School

Private Dwelling * Resthome/Hospital

Garage Misc. (explain) Indefinite but not less than 50 years

Intended Life: Specified as _____ years

PROJECT VALUE (GST inclusive) \$ _____

(Version 10)
July 2010

Form 2 Application for PIM/BC



PROJECT DETAILS *(To be completed if a Project Information Memorandum has not already been issued)*

BUILDING DETAILS – Note all plans to be as per page 8 – Recommended Scale

This application is accompanied by (tick each applicable box, attach relevant documents in duplicate). The drawings, specifications and other documents according to which the building is proposed to be constructed to comply with the provisions of the New Zealand Building Code, with supporting documents if any including:

- | | |
|--|--|
| <input type="checkbox"/> Site Plan | <input type="checkbox"/> Producer Statements (RDC Approved Authors Only) |
| <input type="checkbox"/> Floor Plan | <input type="checkbox"/> Proposed procedures, if any, for inspection during construction |
| <input type="checkbox"/> Elevations | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Cross Sections | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Bracing Calculations | |
| <input type="checkbox"/> Structural Calculations | |
| <input type="checkbox"/> Specifications | |

STATISTICS *(Please complete for all projects)*

Floor (tick boxes)	Roof (tick boxes)	External Cladding (tick boxes)
1 <input type="checkbox"/> Timber	1 <input type="checkbox"/> Steel Sheeting	1 <input type="checkbox"/> Brick
2 <input type="checkbox"/> Concrete	2 <input type="checkbox"/> Steel Tiles	2 <input type="checkbox"/> Concrete
3 <input type="checkbox"/> Wood Products	3 <input type="checkbox"/> Concrete Tiles	3 <input type="checkbox"/> Concrete Block
4 <input type="checkbox"/> Other _____	4 <input type="checkbox"/> Shingles	4 <input type="checkbox"/> Cement Board
	5 <input type="checkbox"/> Aluminium	5 <input type="checkbox"/> Plaster
	6 <input type="checkbox"/> Other _____	6 <input type="checkbox"/> Timber
Framing (tick boxes)	Internal Linings (tick boxes)	7 <input type="checkbox"/> Steel
1 <input type="checkbox"/> Timber	1 <input type="checkbox"/> Plaster Board	8 <input type="checkbox"/> Aluminium
2 <input type="checkbox"/> Concrete	2 <input type="checkbox"/> Fibrous Plaster	9 <input type="checkbox"/> Other _____
3 <input type="checkbox"/> Steel	3 <input type="checkbox"/> Wood Products	
4 <input type="checkbox"/> Aluminium	4 <input type="checkbox"/> Other _____	
5 <input type="checkbox"/> Other _____		

DEMOLITION

10 If the building was built pre 1985 does it contain cement sheet products?

KEY PERSONNEL *(Complete this section as far as possible in all cases. Give names, addresses and telephone numbers)*

Signatures and Registration Number also Required where Noted *

NAME	REGD. NO.	SIGNATURE
Builder _____		
Drainlayer* _____		
Plumber* _____		
Gasfitter* _____		
Electrician* _____		
Other producers and key personnel _____		



FOR REMOVAL OR DEMOLITION OF BUILDINGS		
ALL SERVICES ARE TO BE CAPPED AT THE BOUNDARY AND SHOWN ON PLANS BY A REGISTERED DRAINLAYER/PLUMBER UNDERTAKING THE WORK		
Remove from:	_____	
Resite to:	_____	
Services to be disconnected:	<input type="checkbox"/> Temporarily	<input type="checkbox"/> Permanently
<input type="checkbox"/> Water	<input type="checkbox"/> Sewer	<input type="checkbox"/> Stormwater (where connected to services)

SYSTEMS / FEATURES (COMMERCIAL BUILDINGS)	
--	--

PART A: The above building contains the following systems / features (please tick):	
--	--

<input type="checkbox"/>	SS 1- Automatic systems for fire suppression.
<input type="checkbox"/>	SS 2- Automatic or manual emergency warning systems for fire or other dangers
<input type="checkbox"/>	SS 3/1- Automatic doors
<input type="checkbox"/>	SS 3/2- Access controlled doors
<input type="checkbox"/>	SS 3/3- Interfaced fire or smoke doors/windows
<input type="checkbox"/>	SS 4- Emergency lighting systems
<input type="checkbox"/>	SS 5- Escape route pressurisation systems
<input type="checkbox"/>	SS 6- Riser mains for use by the fire services
<input type="checkbox"/>	SS 7- Automatic back-flow preventers connected to a portable water supply
<input type="checkbox"/>	SS 8/1- Passenger-carrying lifts
<input type="checkbox"/>	SS 8/2- Service lifts
<input type="checkbox"/>	SS 8/3- Escalators and moving walks
<input type="checkbox"/>	SS 9- Mechanical ventilation or air conditioning system
<input type="checkbox"/>	SS 10- Building maintenance units
<input type="checkbox"/>	SS 11- Laboratory fume cupboards
<input type="checkbox"/>	SS 12/1- Audio loops
<input type="checkbox"/>	SS 12/21- FM radio frequencies systems and infrared beam transmission systems
<input type="checkbox"/>	SS 13/1- Mechanical smoke doors
<input type="checkbox"/>	SS 13/2- Natural smoke control
<input type="checkbox"/>	SS 13/3- Smoke curtains
<input type="checkbox"/>	SS 14/1- Emergency power systems
<input type="checkbox"/>	SS 14/2- Signs (relates to 1 or more of the specified systems 1-13)
<input type="checkbox"/>	SS 15/1- Systems used for communicating spoken information intended to facilitate evacuation
<input type="checkbox"/>	SS 15/2- Final exits
<input type="checkbox"/>	SS 15/3- Fire separations
<input type="checkbox"/>	SS 15/4- Signs for communicating information intended to facilitate evacuation Example SS 2- Sign to instruct how to operate alarm call point
<input type="checkbox"/>	SS 15/5- Smoke separations

If Applicable the Specified Systems Above Relate to:

<input type="checkbox"/>	Means of Escape from Fire			
<input type="checkbox"/>	Safety Barriers			
<input type="checkbox"/>	Access and Facilities for People with Disabilities			
<input type="checkbox"/>	Hand Held Hose Reels			
<input type="checkbox"/>	Such Signs as are required by the Building Code or Section 120 of the Building Act 2004			

The building work will comply with the building code as follows: *[Delete this section if this application for a PIM only]*
 ✓ = complies with this code N/A = Not applicable to this project

Clause <i>[Which of the following clauses will be involved in the purposes building work?]</i>	Means of compliance <i>[Refer to the relevant compliance document(s) or detail of alternative solution in the plans and specifications]</i>	Proposed Inspections <i>[State means of inspection. Note PS4 or certification may be required]</i>
<input type="checkbox"/> B1 Structure	<input type="checkbox"/> B1/AS2 <input type="checkbox"/> NZS 1170 <input type="checkbox"/> NZS 3604 <input type="checkbox"/> NZS 4229 <input type="checkbox"/> Other _____ <i>[Specify]</i>	<input type="checkbox"/> Council <input type="checkbox"/> Engineer <input type="checkbox"/> Other _____ <i>[Specify]</i>
<input type="checkbox"/> B2 Durability	<input type="checkbox"/> B2/AS1 <input type="checkbox"/> NZS 3604 <input type="checkbox"/> NZS 3101 <input type="checkbox"/> NZS 3602 <input type="checkbox"/> Other _____ <i>[Specify]</i>	<input type="checkbox"/> Council <input type="checkbox"/> Engineer <input type="checkbox"/> Other _____ <i>[Specify]</i>
<input type="checkbox"/> C1-4 Fire	<input type="checkbox"/> C1/AS1 <input type="checkbox"/> Other _____ <i>[Specify]</i>	<input type="checkbox"/> Council <input type="checkbox"/> Engineer <input type="checkbox"/> Other _____ <i>[Specify]</i>
<input type="checkbox"/> D1 Access Routes	<input type="checkbox"/> D1/AS1 <input type="checkbox"/> NZS 4121 <input type="checkbox"/> Other _____ <i>[Specify]</i>	<input type="checkbox"/> Council <input type="checkbox"/> Engineer <input type="checkbox"/> Other _____ <i>[Specify]</i>
<input type="checkbox"/> D2 Mechanical installations for access	<input type="checkbox"/> D2/AS1 <input type="checkbox"/> NZS 4332 <input type="checkbox"/> EN 81 <input type="checkbox"/> EN 115 <input type="checkbox"/> Other _____ <i>[Specify]</i>	<input type="checkbox"/> Engineer <input type="checkbox"/> Other _____ <i>[Specify]</i>
<input type="checkbox"/> E1 Surface Water	<input type="checkbox"/> E1/AS1 <input type="checkbox"/> AS/NZS 3500.3 <input type="checkbox"/> Other _____ <i>[Specify]</i>	<input type="checkbox"/> Council <input type="checkbox"/> Other _____ <i>[Specify]</i>
<input type="checkbox"/> E2 External Moisture	<input type="checkbox"/> E2/AS1 <input type="checkbox"/> Specific design & testing	<input type="checkbox"/> Council <input type="checkbox"/> Other _____ <i>[Specify]</i>
<input type="checkbox"/> E3 Internal Moisture	<input type="checkbox"/> E3/AS1 <input type="checkbox"/> Other _____ <i>[Specify]</i>	<input type="checkbox"/> Council <input type="checkbox"/> Other _____ <i>[Specify]</i>
<input type="checkbox"/> F1 Hazardous Substances etc	<input type="checkbox"/> F1/AS1 <input type="checkbox"/> Other _____ <i>[Specify]</i>	<input type="checkbox"/> Council <input type="checkbox"/> Other _____ <i>[Specify]</i>
<input type="checkbox"/> F2 Hazardous Building Materials	<input type="checkbox"/> F2/AS1 <input type="checkbox"/> NZS 4223 <input type="checkbox"/> Other _____ <i>[Specify]</i>	<input type="checkbox"/> Council <input type="checkbox"/> Other _____ <i>[Specify]</i>
<input type="checkbox"/> F3 Hazardous Substances	<input type="checkbox"/> F3/AS1 <input type="checkbox"/> Other _____ <i>[Specify]</i>	<input type="checkbox"/> Council <input type="checkbox"/> Other _____ <i>[Specify]</i>
<input type="checkbox"/> F4 Safety from falling	<input type="checkbox"/> F4/AS1 <input type="checkbox"/> FSP Act <input type="checkbox"/> Other _____ <i>[Specify]</i>	<input type="checkbox"/> Council <input type="checkbox"/> Other _____ <i>[Specify]</i>
<input type="checkbox"/> F5 Construction and demolition hazards	<input type="checkbox"/> F5/AS1 <input type="checkbox"/> Other _____ <i>[Specify]</i>	<input type="checkbox"/> Council <input type="checkbox"/> Other _____ <i>[Specify]</i>
<input type="checkbox"/> F6 Lighting for emergency	<input type="checkbox"/> F6/AS1 <input type="checkbox"/> Other _____ <i>[Specify]</i>	<input type="checkbox"/> Council <input type="checkbox"/> Other _____ <i>[Specify]</i>
<input type="checkbox"/> F7 Warning systems	<input type="checkbox"/> F7/AS1 <input type="checkbox"/> AS/NZS 1668 <input type="checkbox"/> NZS 4512 <input type="checkbox"/> NZS 4515 <input type="checkbox"/> Other _____ <i>[Specify]</i>	<input type="checkbox"/> Council <input type="checkbox"/> Engineer <input type="checkbox"/> Other _____ <i>[Specify]</i>
<input type="checkbox"/> F8 Signs	<input type="checkbox"/> F8/AS1 <input type="checkbox"/> Other _____ <i>[Specify]</i>	<input type="checkbox"/> Council <input type="checkbox"/> Other _____ <i>[Specify]</i>
<input type="checkbox"/> G1 Personal Hygiene	<input type="checkbox"/> G1/AS1 <input type="checkbox"/> Other _____ <i>[Specify]</i>	<input type="checkbox"/> Council <input type="checkbox"/> Other _____ <i>[Specify]</i>

<input type="checkbox"/> G2	Laundering	<input type="checkbox"/> G2/AS1	<input type="checkbox"/> Other _____ [Specify]	<input type="checkbox"/> Council <input type="checkbox"/> Other- _____ [Specify]
<input type="checkbox"/> G3	Food preparation and prevention of contamination	<input type="checkbox"/> G3/AS1	<input type="checkbox"/> Other _____ [Specify]	<input type="checkbox"/> Council <input type="checkbox"/> Other- _____ [Specify]
<input type="checkbox"/> G4	Ventilation	<input type="checkbox"/> G4/AS1	<input type="checkbox"/> AS/NZS 1668.2 <input type="checkbox"/> Other _____ [Specify]	<input type="checkbox"/> Council <input type="checkbox"/> Other- _____ [Specify]
<input type="checkbox"/> G5	Interior environment	<input type="checkbox"/> G5/AS1	<input type="checkbox"/> Other _____ [Specify]	<input type="checkbox"/> Council <input type="checkbox"/> Other- _____ [Specify]
<input type="checkbox"/> G6	Airborne & impact sound	<input type="checkbox"/> G6/AS1	<input type="checkbox"/> Other _____ [Specify]	<input type="checkbox"/> Council <input type="checkbox"/> Other- _____ [Specify]
<input type="checkbox"/> G7	Natural light	<input type="checkbox"/> G7/AS1	<input type="checkbox"/> Other _____ [Specify]	<input type="checkbox"/> Council <input type="checkbox"/> Other- _____ [Specify]
<input type="checkbox"/> G8	Artificial light	<input type="checkbox"/> G8/AS1	<input type="checkbox"/> NZS 6703 <input type="checkbox"/> Other _____ [Specify]	<input type="checkbox"/> Council <input type="checkbox"/> Other- _____ [Specify]
<input type="checkbox"/> G9	Electricity	<input type="checkbox"/> G9/AS1	<input type="checkbox"/> Other _____ [Specify]	By certification only
<input type="checkbox"/> G10	Piped services	<input type="checkbox"/> G10/AS1 <input type="checkbox"/> NZS 5261	<input type="checkbox"/> Other _____ [Specify]	By certification only
<input type="checkbox"/> G11	Gas as an energy source	<input type="checkbox"/> G11/AS1	<input type="checkbox"/> Other _____ [Specify]	By certification only
<input type="checkbox"/> G12	Water supplies	<input type="checkbox"/> G12/AS1 <input type="checkbox"/> AS/NZS 3550.1	<input type="checkbox"/> AS/NZS 3500.4 <input type="checkbox"/> Other _____ [Specify]	<input type="checkbox"/> Council <input type="checkbox"/> Other- _____ [Specify]
<input type="checkbox"/> G13	Foul water	<input type="checkbox"/> G13/AS1	<input type="checkbox"/> AS/NZS 3500.2 BS 5572 <input type="checkbox"/> Other _____ [Specify]	<input type="checkbox"/> Council <input type="checkbox"/> Other- _____ [Specify]
<input type="checkbox"/> G14	Industrial liquid waste	<input type="checkbox"/> G14/AS1	<input type="checkbox"/> Other _____ [Specify]	<input type="checkbox"/> Council <input type="checkbox"/> Other- _____ [Specify]
<input type="checkbox"/> G15	Solid waste	<input type="checkbox"/> G15/AS1	<input type="checkbox"/> Other _____ [Specify]	<input type="checkbox"/> Council <input type="checkbox"/> Other- _____ [Specify]
<input type="checkbox"/> H1	Energy efficient	<input type="checkbox"/> H1/AS1 <input type="checkbox"/> NZS 4218 <input type="checkbox"/> ALF Design manual	<input type="checkbox"/> NZS 4243 <input type="checkbox"/> NZS 4214 <input type="checkbox"/> Other _____ [Specify]	<input type="checkbox"/> Council <input type="checkbox"/> Other- _____ [Specify]

GENERAL INFORMATION		
1. All fees are to be paid on Application.	Project Information Memorandum	_____
	Building Consent	_____
	Code Compliance Certificate	_____
	Admin	\$50.00
2. At the completion of the work, if further inspections have been carried out due to circumstances not envisaged, charges will be made in accordance with Section 54 of the Building Act 2004.	Compliance Schedule	_____
	DPC	_____
	BCP	\$60.00
3. Council Staff are available to assist in any matters of the Building Act. Please enquire.	Inspections x	_____
	DBH Levy	_____
4. It is important that all supporting documents accompany this application.	BRANZ Research Levy	_____
	Accreditation Levy	_____
	TOTAL	\$ _____

IMPORTANT INFORMATION – Read this BEFORE signing

FAILURE TO HAVE INSPECTIONS CARRIED OUT.

A Form 6 application for Code Compliance Certificate form will be included with your Building Consent once this application has been processed and issued.

The Ruapehu District Council can only issue a Code Compliance Certificate (CCC) when Council has been notified that all work is complete and that a Final Inspection is required. Form 6 must be submitted at the time of this request.

The Ruapehu District Council will then inspect the work to make sure that the work carried out complies with the Building Code.

Where the Ruapehu District Council is unable to issue a CCC because of uncertainty about compliance of building work with the consent issued and the Building Code, a 'Notice to Fix' will be issued. This will outline any work that needs to be undertaken to achieve compliance. If any issues cannot be resolved Council may prosecute, and a demolition order to remove the building may be sought.

Remember, without a CCC it may be difficult to sell or mortgage a property, and insurance complications may arise in certain circumstances.

Please Note: The information on this Building Consent is public information, and may be used by some agencies for statistical purposes.

<i>I believe that the information contained in this application is true and correct.</i>	
Signed for and on behalf of the owner by the agent.	
Signature:	_____
Name:	_____
Date:	_____

A SEPARATE CONSENT IS REQUIRED FOR ALL FIRE INSTALLATIONS

OFFICE USE ONLY		
	ACCREDITATION	\$ _____
	DBH LEVY	\$ _____
RECEIPT NO _____	BRANZ	\$ _____
DATED _____	FEE DEPOSIT	\$ _____
CONSENT ISSUED _____	TOTAL TO PAY	\$ _____
	BALANCE OWING	\$ _____

Please Note: all fees must be paid for Building Consent to be issued.

IMPORTANT NOTICE

Your application for Building Consent may be subject to Development Contributions introduced by Council on 1 July 2006.

Your application will need to be assessed; you will be advised if you are required to pay Development Contributions.

BUILDING CONSENT AGENT CHECKLIST

	Agent No. of Copies	Customer Service Officer Use Only	Building Control Officer Use Only
<p>1. Building Consent Application Form Ensure all details are completed. If your building is to have Compliance Schedule Systems (pursuant to the Building Act, Section 103, e.g. alarm, sprinklers, lift, etc) installed or altered, it is important that the "Compliance Schedule Details" section of the application form is completed.</p>	1	<input type="checkbox"/>	<input type="checkbox"/>
<p>2. COPY OF CERTIFICATE OF TITLE – including Diagram Page Proof of ownership of the land on which the building is to be sited. (If you are a new owner and have not yet received your Title, go to 3 below)</p>	1	<input type="checkbox"/>	<input type="checkbox"/>
<p>3. Letter of Intent to Purchase/Proof of Ownership To be provided by your solicitor if you have not yet legally acquired your new property in full and Title has not been issued, or Notice of Sale received by Council.</p>	1	<input type="checkbox"/>	<input type="checkbox"/>
<p>4. Utilities Does your proposed building require connection to Council utilities, i.e. water, sewer, stormwater, etc <input type="checkbox"/> YES <input type="checkbox"/> NO</p>	1	<input type="checkbox"/>	<input type="checkbox"/>
<p>5. Site Plan This is required to show the proposed building/s in relation to other buildings on site, including all distances to boundaries, and to determine compliance with the District Plan. If the project involves plumbing and drainage, show the layout of the drainage, sewer and stormwater disposal and include proposed water supply source if you are not in a Council water reticulated area (a water test may be required). If water storage tank supply is proposed, please state the tanks water storage capacity.</p>	2	<input type="checkbox"/>	<input type="checkbox"/>
<p>6. Plans, Elevations & Structural Details Fully dimensioned floor plans, elevations, cross sections and construction details. Ensure that the elevation views show each side and height of the building, as well as foundation and fixing details. All this information can be shown on a cross-section of the building. Show position of all sanitary fittings, and provide a layout plan of water supply pipes, waste pipes and soil pipe installations.</p>	2	<input type="checkbox"/>	<input type="checkbox"/>
<p>7. Pile/Foundation Layout Required for all new buildings, extensions, etc, or if relocating an existing building.</p>	2	<input type="checkbox"/>	<input type="checkbox"/>
<p>8. Written Specification Detailed specification covering the building, plumbing and drainage materials and works in accordance with the Building Code.</p>	2	<input type="checkbox"/>	<input type="checkbox"/>
<p>9. Bracing Schedule All new buildings and substantial alterations require a bracing schedule to prove compliance with the wall and sub-floor bracing requirements of the Building Code. It must be accompanied by a layout plan showing where the braces go.</p>	2	<input type="checkbox"/>	<input type="checkbox"/>
<p>10. Truss Layout Plan If you are using trusses in your building you will need to include a truss layout plan from an approved manufacturer.</p>	2	<input type="checkbox"/>	<input type="checkbox"/>

11. Fire Safety Design Summary

These will be required to show compliance with the requirements of the Fire Code Documents C2, C3, C4 of the NZ Building Code. It is required for all new and altered commercial and community type buildings, and some others, with the exemption of single private dwellings.

2

12. Producer Statements

These will be required to support any plans that give specific design engineering input, e.g. engineers design foundation, steel beams/portals, specific design kitset buildings, etc.

2

13. Site Report

This is required for any building site that is of unknown suitability, or geological stability, e.g. your site may have unstable land on a hillside above. The report is usually undertaken by a Registered Civil Engineer or Engineering Geologist.

2

14. Means of Compliance Sheet.

1

Owner's Name: _____
 Owner's Signature: _____
 Date: _____

Receiving Officer: _____
 Receiving Signature: _____
 Date: _____

Action Taken: Returned
 Accepted for Processing

Recommended Scale

Site Plan	1:200	✓ = Items required & received
Foundation	1:100	X = Not Provided and Required
Floor	1:50	n/a = Not Applicable to Project
Exterior Sections	1:100 1:50	
Construction	1:5	

<u>Office Use Only</u>	
BCO	_____
Date	_____
<input type="checkbox"/> Received <input type="checkbox"/> Return to agent	
CSO Entered	_____