

## Form 8 - Application for a Certificate of Acceptance

TS-36 AP 6.0 22/4/2015

### Section 97, Building Act 2004:

Send or deliver this application to either:

Mackenzie District Council, PO Box 52, Fairlie

Mackenzie District Council, Market Place, Twizel.

For enquiries phone (03) 685 9010

### OFFICE USE:

Application

# Category 1,2,3,PR

PIM, Planning, Drainage, Roading

### The Building

<b>Street address of building:</b>	
<b>Legal description of land where building is located:</b> (State legal description as at the date of application and if the land is proposed to be subdivided, include details of relevant lot numbers and subdivision consents)	
<b>Building name:</b> (If applicable)	
<b>Location of building within site:</b> (Include nearest street access)	
<b>Number of levels:</b> (Include ground level and any levels below ground)	
<b>Level/Unit Number:</b> (If applicable)	
<b>Area:</b> (total floor area – indicate area affected by the building work if less than the total area)	
<b>Current, lawfully established, use:</b> (include number of occupants per level and per use if more than 1 level)	
<b>Year first constructed:</b> (insert year, approximate date is acceptable eg: c1920's or 1960-1970)	

## The Owner

<b>Name of owner:</b> (include preferred form of title, eg: Mr Miss, Dr, if an individual)	
<b>Contact person:</b> (only required if different from owner)	
<b>Mailing address:</b>	
<b>Street address / Registered Office:</b>	
<b>Phone - Landline:</b>	
<b>Mobile:</b>	
<b>Daytime:</b>	
<b>After hours:</b>	
<b>Facsimile:</b>	
<b>Email:</b>	
<b>Website:</b>	

### The following evidence of ownership is attached:

<input type="checkbox"/> Record of Title	<input type="checkbox"/> Lease Agreement
<input type="checkbox"/> Agreement for Sale and Purchase	<input type="checkbox"/> or other document no older than 3 months showing full name of legal owner(s) of the building.

## The Agent

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

<b>Name of Agent:</b>	
<b>Contact person:</b>	
<b>Mailing address:</b>	
<b>Street address / Registered Office:</b>	
<b>Phone - Landline:</b>	
<b>Mobile:</b>	
<b>Daytime:</b>	
<b>After hours:</b>	
<b>Facsimile:</b>	
<b>Email:</b>	
<b>Website:</b>	
<b>Relationship to Owner:</b> (state details of the authorisation from the owner to make the application on the owners behalf)	

## First Point Of Contact

(If different from the Owner or Agent)

<b>Name of contact:</b>	
<b>Mailing address:</b>	
<b>Street address/Registered Office:</b>	
<b>Phone - Landline:</b>	
<b>Mobile:</b>	
<b>Facsimile:</b>	
<b>Email:</b>	

## Request

I request that you issue a Certificate of Acceptance for the building work described in this application.

**Signed by the owner OR:**

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signed by the Agent:**

(on behalf of, or with authority from, the owner)

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## Building Work

Description of the building work:

--

Date building work carried out:

--

Concreter:

<b>Business/name:</b>	
-----------------------	--

Joiner:

<b>Business/name:</b>	
-----------------------	--

Tanking Applicator:

<b>Business/name:</b>	
-----------------------	--

Plasterer/textured coater:

<b>Business/name:</b>	
-----------------------	--

Gasfitter:

<b>Business/name:</b>	
-----------------------	--

Electrician:

<b>Business/name:</b>	
-----------------------	--

**Plumber:**

<b>Business/name:</b>	
<b>Address:</b>	
<b>Daytime:</b>	
<b>Mobile:</b>	
<b>After hours:</b>	
<b>Fax:</b>	
<b>Registration / Qualification:</b>	

**Drainlayer:**

<b>Business/name:</b>	
<b>Address:</b>	
<b>Daytime:</b>	
<b>Mobile:</b>	
<b>After hours:</b>	
<b>Fax:</b>	
<b>Registration / Qualification:</b>	

**Carpenter:**

<b>Business/name:</b>	
<b>Address:</b>	
<b>Daytime:</b>	
<b>Mobile:</b>	
<b>After hours:</b>	
<b>Fax:</b>	
<b>Registration / Qualification:</b>	

**Brick/Blocklayer:**

<b>Business/name:</b>	
<b>Address:</b>	
<b>Daytime:</b>	
<b>Mobile:</b>	
<b>After hours:</b>	
<b>Fax:</b>	
<b>Registration / Qualification:</b>	

Deck/roof membrane applicator:

<b>Business/name:</b>	
<b>Address:</b>	
<b>Daytime:</b>	
<b>Mobile:</b>	
<b>After hours:</b>	
<b>Fax:</b>	
<b>Registration / Qualification:</b>	

Roofer:

<b>Business/name:</b>	
<b>Address:</b>	
<b>Daytime:</b>	
<b>Mobile:</b>	
<b>After hours:</b>	
<b>Fax:</b>	
<b>Registration / Qualification:</b>	

Concealed fascia installer:

<b>Business/name:</b>	
<b>Address:</b>	
<b>Daytime:</b>	
<b>Mobile:</b>	
<b>After hours:</b>	
<b>Fax:</b>	
<b>Registration / Qualification:</b>	

Others:

<b>Business/name:</b>	
<b>Address:</b>	
<b>Daytime:</b>	
<b>Mobile:</b>	
<b>After hours:</b>	
<b>Fax:</b>	
<b>Registration / Qualification:</b>	

## Use of the building

Did the building work result in a change of use of the building?

(ie: Commercial, Industrial, Residential)

Yes  No

If yes, provide details of the new use:

Intended life of the building if less than 50 years:

**Years:**

List building consents previously issued for this project (if any):

(list who issued the consent, date of issue and the consent number)

Estimated value of the building work on which the building levy will be calculated (including GST):

(state estimated values as defined in section 7 of the Building Act 2004)

\$

The following plans and specifications are attached to this application:

(tick boxes applicable)

<input type="checkbox"/> specifications	<input type="checkbox"/> calculations	<input type="checkbox"/> plans
<input type="checkbox"/> producer statement	<input type="checkbox"/> other (please specify)	_____

(All plans and specifications must meet the minimum requirements set out in the regulations or required by the building consent authority)

**Reasons why a certificate of acceptance is required:**

(tick boxes applicable)

The owner, or the owner's predecessor in title, carried out building work for which a building consent is required, but a building consent was not obtained because: (explain in detail)

A building consent could not practicably be obtained in advance because the building work had to be carried out urgently: (delete one of the following)

a.) for the purpose of saving or protecting life or health or preventing serious damage to property as follows: (explain in detail)

b.) in order to ensure that a specified system was maintained in a safe condition or made safe as follows: (explain in detail)

The building consent authority that granted the building consent is unable or refuses to issue a code compliance certificate in relation to the building work, and no other building consent authority will agree to issue a code compliance certificate for the building work: (state details of name of building consent authority and building consent granted)

## Specified Systems

There are no specified systems

OR The following specified systems are existing, being altered, added to, or removed in the course of the building work:

		Existing	New	Altered	Added	Removed
SS 1	<b>Automatic systems for fire suppression</b>	<input type="checkbox"/>				
SS 2	<b>Automatic or manual emergency warning systems for fire or other emergencies</b>	<input type="checkbox"/>				
SS 3	<b>Electromagnetic or automatic doors or windows</b>	<input type="checkbox"/>				
SS 4	<b>Emergency lighting systems</b>	<input type="checkbox"/>				
SS 5	<b>Escape route pressurisation systems</b>	<input type="checkbox"/>				
SS 6	<b>Riser mains for use by fire services</b>	<input type="checkbox"/>				
SS 7	<b>Automatic back-flow preventers connected to a potable water supply</b>	<input type="checkbox"/>				
SS 8	<b>Lifts, escalators, travelators, or other systems for moving people or goods within buildings</b>	<input type="checkbox"/>				
SS 9	<b>Mechanical ventilation or air conditioning systems</b>	<input type="checkbox"/>				
SS 10	<b>Building maintenance units providing access to exterior and interior walls of buildings</b>	<input type="checkbox"/>				
SS 11	<b>Laboratory fume cupboards</b>	<input type="checkbox"/>				
SS 12	<b>Audio loops or other assistive listening systems</b>	<input type="checkbox"/>				
SS 13	<b>Smoke control systems</b>	<input type="checkbox"/>				
SS 14	<b>Emergency power systems</b> for, or signs relating to, a system or feature specified in any of SS 1 to SS 13 above	<input type="checkbox"/>				
SS 15	<b>Other fire safety systems or features</b> (systems for communicating information intended to facilitate evacuation, final exits, fire separations, signs, smoke separations)	<input type="checkbox"/>				
SS 16	<b>Cable cars</b>	<input type="checkbox"/>				

## Attachments

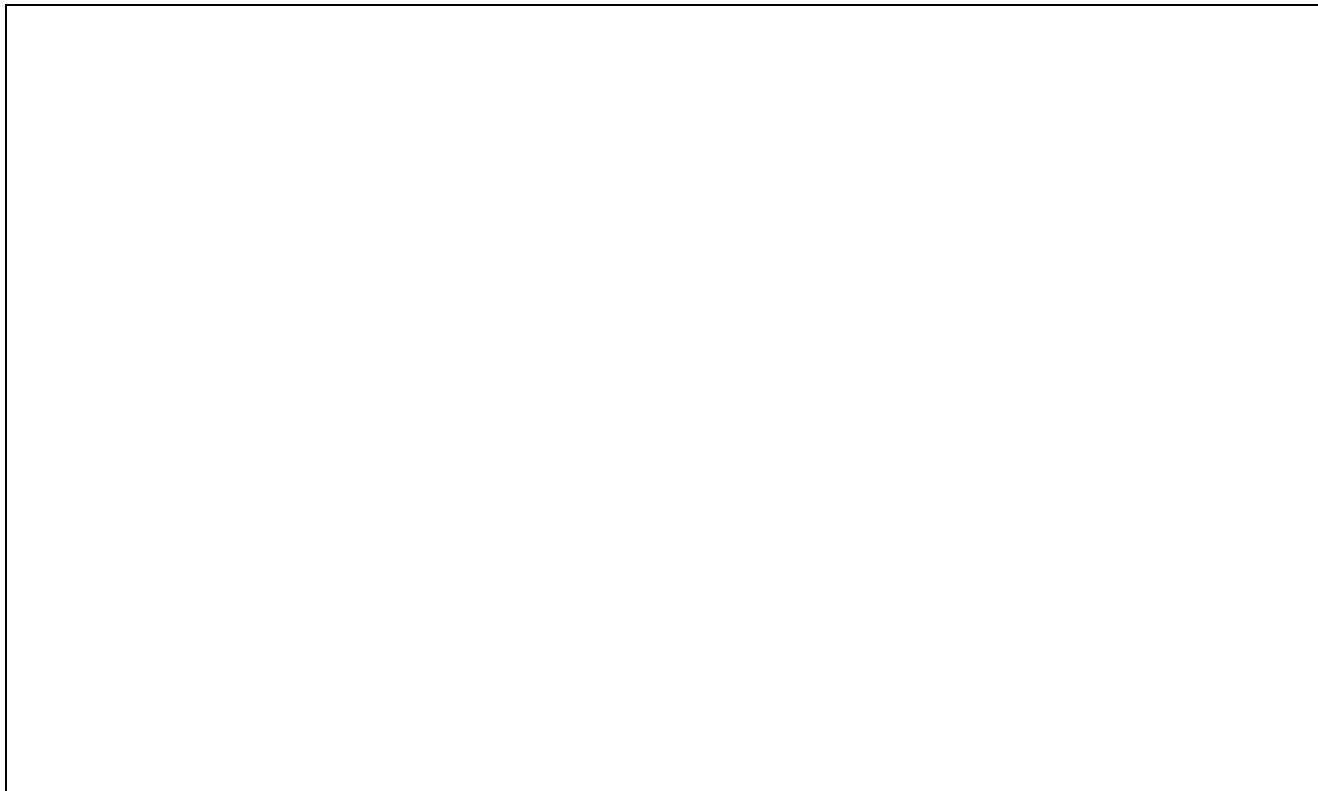
The following documents are attached to this application:  
(tick boxes applicable)

- Project information memorandum
- Plans and specifications
- Certificates from personnel who carried out the building work
- Energy work certificate
- Certificates from personnel who carried out the building work
- Energy work certificate
- Certificates from personnel who supervised the building work
- Investigatory reports

---

## Council use only:

- Mail
- Desk

A large, empty rectangular box with a thin black border, occupying most of the page below the 'Council use only:' section. It is intended for the council to mark with a checkmark if they require the document via mail or desk.