Form 2: Application for PIM and/or Building Consent

RBW1

Working Together

Section 33 or section 45, Building Act 2004

1. THE BUILDING [Complete ALL fields on this form – put N/A if not applicable]

Street address of building: 2 Fowlers avenue, Frankton, Hamilton 3204

Legal description of land where building is located: Lot(s) Flat A DP/S 33546

Building name: 2 Fowlers Avenue

Location of building within site / block number: [include nearest street access] The residential house is the the road front house at 2 Fowlers Avenue, Frankton. It is accessed off Fowlers Avenue

Number of levels: [above & below ground] 1 Level / Unit Number: NA

Floor area: 105 (sq m) [Indicate area affected by the building work]

Current, lawfully established, use: [add no. of occupants per level and per use if more than 1] ~~Single stand-alone residential house~~ detached dwelling

Year first constructed: [approximate date is acceptable e. g.: c1920s or 1960-1970] 1930's

OFFICE ONLY:

Consent / PIM No.: 2016/34730

Document or Parcel No.: 8176.

Valuation No.:

Date received:

RECEIVED
21 SEP 2016
BUILDING

2. THE OWNER

Name of Owner / Company: Yolanda Cholmondeley-Sm & MAH Trustees Ltd

Contact person Yolanda

Mailing address: 2 fowlers avenue, frankton, Hamilton 3204

Street address / registered office: as above

Phone Number: Landline: 027 234 9560

Mobile: —

Daytime: —

After hours: —

Facsimile number: —

Email address: yolanda@yolanda-innervisions.com

Website: —

THE FOLLOWING EVIDENCE OF OWNERSHIP IS ATTACHED TO THIS APPLICATION:

☑ Certificate of Title ☐ Lease Agreement

☐ Agreement for Sale and Purchase ☐ Other document

3. AGENT [if application is being made on behalf of the owner]

Name of Agent / Company: Tawa architecture limited

Contact person: Brooke Cholmondeley-Smith

Mailing address: As below

Street address / registered office: 3 Calvert Place, Cambridge 3434

Phone Number: Landline: —

Mobile: 021 995 573

Daytime: —

After hours: —

Facsimile number: —

Email address: brooke@tawaarch.co.nz

Website: —

Relationship to owner: [state details of the authorisation from the owner to make the application on the owner's behalf] Designer

FIRST POINT OF CONTACT for communications with the Council / Building Consent Authority: ☐ Owner ☑ Agent

(Full name and contact details)

HAMILTON CITY COUNCIL
BUILDING UNIT
APPROVED
SUBJECT TO CONDITIONS
TO BE KEPT ON SITE

INVOICE TO: ☑ Owner ☐ Agent

4. APPLICATION [tick if applicable]

Res 1

Duplicate issued

I request that you issue:

☐ A Project Information Memorandum (PIM) PLEASE COMPLETE SECTIONS 5 and 7

☑ A Building Consent [The existing PIM No. : (If applicable)] PLEASE COMPLETE SECTIONS: 5, 6, 8, 9 and 10

☐ An Amendment to an existing Building Consent [Existing BC No.:] PLEASE COMPLETE SECTIONS: 5, 6, 8, 9 and 10

for the building work described in this application.

State the reference number if this application involves a National Multiple Use Approval: —

Name: Brooke Cholmondeley-Smith Signature: Date: 21.09.2016

The signature is that of the ☐ Owner OR the ☐ Agent on behalf of and with the approval of the Owner

5. THE PROJECT [if more than one project please list on a separate page]

DESCRIPTION OF THE BUILDING WORK: Provide enough information to enable scope of work to be fully understood, (e.g. adding ensuite to house)

Remove several of the existing internal walls of the house. Replace with new ceiling lintels and wall bracing as required. Replace existing bathroom fittings. Replace kitchen. Replace external windows with new

Will the building work result in a change of use of the building? ☐ Yes ☑ No. If Yes, provide details of the new use of the building (e.g. home to hostel, implement shed to chemical storage, office to restaurant): .....

Intended life of the building if less than 50 years: 50 [Years]

List Building Consents previously issued for this project (if any): [List who issued the consent, the date of issue and the consent number]

NA

Estimated value of the building work on which the building levy will be calculated (including goods and services tax):

$ $60,000.00 [State estimated value as defined in section 7 of the Building Act 2004]

6. RESTRICTED BUILDING WORK: BUILDING PRACTITIONERS INVOLVED IN THIS PROJECT

Will the building work include any restricted building work? ☑ Yes ☐ No. If Yes, provide the following details of all licensed building practitioners who will be involved in carrying out or supervising the restricted building work:

[if these details are unknown at the time of the application, they must be supplied before the building work begins – name, licensing class and Licensed Building Practitioner's number (or registration number if treated as being licensed under 291 of the Act)]

DESIGNER Name: Tawa Architecture limited Licence Class: LBP design 3

Registration / Licence No.: BP130796 Verified on LBP Register

Address: 3 Calvert Place, Cambridge 3434

Telephone: ..... Fax: ..... Mobile: 021 995 573

Email: brooke@tawaarch.co.nz

ENGINEER Name: NA Licence Class: .....

Registration / Licence No.: .....

Address: .....

Telephone: ..... Fax: ..... Mobile: .....

Email: .....

CARPENTER Name: Roger Ramsey Building Licence Class: Site

Registration / Licence No.: BP 117321 Verified on LBP Register

Address: 1160 Wharepuhunga Road R D 3 Te Awamutu 3873

Telephone: 07 871 3385 Fax: ..... Mobile: .....

Email: roger@rogerramseybuilding.co.nz

ROOFER Name: ..... Licence Class: .....

Registration / Licence No.: .....

Address: .....

Telephone: ..... Fax: ..... Mobile: .....

Email: .....

EXTERNAL PLASTERER Name: ..... Licence Class: .....

Registration / Licence No.: .....

Address: .....

Telephone: ..... Fax: ..... Mobile: .....

Email: .....

PLEASE CONTINUE SECTION 6 ON THE NEXT PAGE (NOTE: continue on another page if necessary)

BRICK / BLOCKLAYER Name: ..... Licence Class: .....
Registration / Licence No.: .....
Address: .....
Telephone: ..... Fax: ..... Mobile: .....
Email: .....

FOUNDATION SPECIALIST Name: ..... Licence Class: .....
Registration / Licence No.: .....
Address: .....
Telephone: ..... Fax: ..... Mobile: .....
Email: .....

PLUMBER Name: Waipa Plumbing and Gas Licence Class: .....
Registration / Licence No.: 14315
Address: 64 Herbert St, Kihikihi 3800 Verified on LBP Register PCDS
Telephone: ..... Fax: ..... Mobile: 021 224 9300
Email: .....

GASFITTER Name: as above Licence Class: .....
Registration / Licence No.: .....
Address: .....
Telephone: ..... Fax: ..... Mobile: .....
Email: .....

Other LBP Name: ..... Licence Class: .....
Registration / Licence No.: .....
Address: .....
Telephone: ..... Fax: ..... Mobile: .....
Email: .....

Other LBP Name: Bobby Rollinson Electrical Licence Class: .....
Registration / Licence No.: E253138
Address: 1/115 Collins Ave, Te Awamutu
Telephone: ..... Fax: ..... Mobile: .....
Email: .....

7. PROJECT INFORMATION MEMORANDUM The following matters are involved in the project: Tick the matters relevant to the project [do not fill in this section if the application is for a building consent only]

- ☐ Subdivision
- ☐ Alterations to land contours [e.g. digging out the site for a building platform]
- ☐ New or altered connections to public utilities [e.g. Council sewer, storm water or water mains]
- ☐ New or altered locations and / or external dimensions of buildings
- ☐ New or altered access for vehicles
- ☐ Building work over or adjacent to any road or public place
- ☐ Disposal of stormwater and wastewater [e.g. are you altering domestic sewer or storm water drains]
- ☐ Building work over any existing drains or sewers or in close proximity to wells or water mains
- ☐ Is the site contaminated?
- ☐ Will the building be sited on sloping ground, or near to a bank, a stream or a coastal zone?
- ☐ Other matters known to the applicant that may require authorisations from the Territorial Authority: [Please attach]

8. BUILDING CONSENT

The following plans and specifications are attached to this application: [Note: All plans and specifications must meet the minimum requirements set out in the regulations or required by the Building Consent Authority (BCA)]

☑ Refer to documents indicated on the applicant checklist ☐ Other documents [Please specify]: .....

THE BUILDING WORK WILL COMPLY WITH THE BUILDING CODE AS FOLLOWS:

[If you're not sure which clauses are applicable, talk to your Designer]

Building Code clause [☑ Tick / list relevant clause of building code]	**Means of Compliance** [Refer to relevant compliance document(s) or detail of alternative solution in the plans and specifications]		**Waiver / modification required** [Supporting documents recorded below]
	Acceptable Solution [Specify]	**Other Means of Compliance – Verification Method or Alternative Solution** [If ☐ Other, then list at the end of this section]	
☑ B1 Structure	☑ B1/AS1 ☐ Other ☐ NZS3604 ☐ NZS4229	☐ B1/VM1 ☐ Other ☐ AS/NZS1170 ☐ SED	☐
☑ B2 Durability	☑ B2/AS1	☐ B2/VM1 ☐ Other	☐
☐ C 1 – C6 Protection From Fire	☐ C/AS1 ☐ C/AS2 ☐ C/AS3 ☐ C/AS4 ☐ C/AS5 ☐ C/AS6 ☐ C/AS7	☐ Other	☐
☐ D1 Access routes	☐ D1/AS1 ☐ NZS 4121	☐ Other	☐
☐ D2 Mechanical installations for access	☐ D2/AS1 ☐ D2/AS2 ☐ D2/AS3 ☐ NZS 4121	☐ Other	☐
☐ E1 Surface water	☐ E1/AS1 ☐ AS3500	☐ E1/VM1 ☐ Other	☐
☑ E2 External moisture	☑ E2/AS1 ☐ E2/AS2 ☐ E2/AS3	☐ E2/VM1 ☐ Other ☐ SED	☐
☐ E3 Internal moisture	☐ E3/AS1	☐ Other	☐
☐ F1 Hazardous agents on site	☐ F1/AS1	☐ F1/VM1 ☐ Other	☐
☐ F2 Hazardous building materials	☐ F2/AS1	☐ Other	☐
☐ F3 Hazardous substances / processes	☐ F3/AS1	☐ F3/VM1 ☐ Other	☐
☐ F4 Safety from falling	☐ F4/AS1	☐ Other	☐
☐ F5 Construction / Demolition hazards	☐ F5/AS1	☐ Other	☐
☐ F6 Lighting for emergency	☐ F6/AS1	☐ Other	☐
☐ F7 Warning systems	☐ F7/AS1	☐ Other	☐
☐ F8 Signs	☐ F8/AS1 ☐ NZS 4121	☐ Other	☐
☑ G1 Personal hygiene	☐ G1/AS1 ☐ NZS 4121	☐ Other	☐
☐ G2 Laundering	☐ G2/AS1 ☐ NZS 4121	☐ Other	☐
☐ G3 Food preparation / Prevention of contamination	☐ G3/AS1 ☐ NZS 4121	☐ Other	☐
☑ G4 Ventilation	☑ G4/AS1	☐ G4/VM1 ☐ Other	☐
☐ G5 Interior environment	☐ G5/AS1	☐ Other	☐
☐ G6 Airborne and impact sound	☐ G6/AS1	☐ G6/VM1 ☐ Other	☐
☐ G7 Natural light	☐ G7/AS1	☐ G7/VM1 ☐ Other	☐

PLEASE CONTINUE SECTION 8 ON THE NEXT PAGE

Building Code clause	Acceptable Solution	Verification Method or Alternative Solution	Waiver / modification required
☐ G8 Artificial light	☐ G8/AS1	☐ G8/VM1 ☐ Other	☐
☐ G9 Electricity	☐ G9/AS1	☐ G9/VM1 ☐ Other	☐
☐ G10 Piped services	☐ G10/AS1	☐ G10/VM1 ☐ Other	☐
☐ G11 Gas as an energy source	☐ G11/AS1	☐ Other	☐
☑ G12 Water supplies	☐ G12/AS1 ☐ G12/AS2	☐ G12/VM1 ☐ Other	☐
☑ G13 Foul water	☐ G13/AS1 ☐ G13/AS2 ☐ AS3500 ☐ G13/AS3	☐ G13/VM1 ☐ G13/VM4 ☐ Other	☐
☐ G14 Industrial liquid waste	☐ G14/AS1	☐ G14/VM1 ☐ Other	☐
☐ G15 Solid waste	☐ G15/AS1	☐ Other	☐
☐ H1 Energy efficiency	☐ H1/AS1	☐ H1/VM1 ☐ Other	☐
Other	☐ BCH Back country huts ☐ SH Simple House		☐
Waiver / Modification required [List supporting documents]			
Alternative Solution [List supporting documents]			

9. COMPLIANCE SCHEDULE *[do not fill in this section if this is an application for a Project Information Memorandum only]*

☐ The specified systems for the building are as follows: *[specified systems are defined in regulations]* **OR**

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

☑ There are **NO** specified systems in the building ***[Note**: If unsure whether your building has specified systems, talk to the BCA or your architect]*

The following specified systems are being altered, added to, or removed in the course of the building work: [Tick those that are applicable]	**Existing** [✓Tick]	**New or Added** [✓Tick]	**Altered** [✓Tick]	**Removed** [✓Tick]
SS1 Automatic systems for fire suppression (e.g. sprinkler systems)				
SS2 Automatic or manual emergency warning systems for fire or other dangers (other than a warning system for fire that is entirely within a household unit and serves only that unit)				
SS3 Electromagnetic or automatic doors or windows (e.g. ones that close on fire alarm activation)				
SS3/1 Automatic doors				
SS3/2 Access controlled doors				
SS3/3 Interfaced fire or smoke doors or windows				
SS4 Emergency lighting systems				
SS5 Escape route pressurisation systems				
SS6 Riser mains for use by fire services				
SS7 Automatic back-flow preventers connected to a potable water supply				
SS8 Lifts, escalators, travelators, or other systems for moving people or goods within buildings				
SS8/1 Passenger carrying lifts				
SS8/2 Service lifts				
SS8/3 Escalators and moving walks (travelators)				
SS9 Mechanical ventilation or air conditioning systems				
SS9/1 Mechanical ventilation				
SS9/2 Air conditioning systems				
SS10 Building maintenance units providing access to exterior and interior walls of buildings				

PLEASE CONTINUE SECTION 9 ON THE NEXT PAGE

SS11 Laboratory fume cupboards				
SS12 Audio loops or other assistive listening systems				
SS12/1 Audio loops				
SS12/2 FM radio frequency systems and infrared beam transmission systems				
SS13 Smoke control systems				
SS13/1 Mechanical smoke control				
SS13/2 Natural smoke control				
SS13/3 Smoke curtains				
SS14 Emergency power systems for, or signs relating to, a system or feature specified in any of clauses 1 to 13				
SS14/1 Emergency power systems				
SS14/2 Signs in relation to any specified systems 1-13				
SS15 Any or all of the following systems and features, so long as they form part of a building's means of escape from fire, and so long as those means also contain any or all of the systems or features specified in clauses 1 to 6, 9, and 13:				
SS15/1 Systems for communicating spoken information intended to facilitate evacuation				
SS15/2 Final exits				
SS15/3 Fire separations (as defined by the Building Code)				
SS15/4 Signs for communicating information intended to facilitate evacuation				
SS15/5 Smoke separations				
SS16 Cable Cars				

10. ATTACHMENTS

[**Note**: all plans and specifications must meet the minimum requirements set out in the regulations or required by the BCA]

The following documents are attached to this application: [Tick as applicable or put NA if there are no attachments]

- ☑ Plans and specifications [*list*]..... plans / specs .....
- ☑ Memoranda (Certificates of Design Work) from licensed building practitioner(s) who carried out or supervised any design work that is restricted building work
- ☐ Project Information Memorandum
- ☐ Development contribution notice
- ☐ Certificate attached to Project Information Memorandum
- ☐ Other relevant information: [Please specify]: .....

11. MATAMATA PIAKO DISTRICT COUNCIL ONLY

If your Building Consent is at Matamata Piako District Council, please tick which of your Council offices you wish to collect your Consent from when it is ready:

☐ Te Aroha ☐ Matamata ☐ Morrinsville

OFFICE USE ONLY **FEES PAYABLE:**	**AMOUNT ($)**
PIM	
Building Consent - Application fee - Approval fee - Inspection fee - Mileage	1180
Code Compliance Certificate	
BRANZ levy	60
MBIE levy	120.60
Photocopying	
Microfilm (A3 / A4) / Scanning	53
Certificate of Title	
Street crossing administration	
Structural check	
Amendments to consent	
External consultant 1	
External consultant 2	
NZ Fire Service check	
Planning Bond / Resource Consent	
Planning Bond / Resource Consent	
Rural connection	
Fire main	
Water connection	
Water disconnection	
Wastewater / sewerage connection	
Wastewater disconnection	
Backflow inspection	
Stormwater connection - mains	
Stormwater connection - kerb & channel	
Stormwater disconnection	
CCTV survey wastewater	
CCTV survey stormwater	
Cellar indemnity	
Council bonds	
Compliance schedule	
Development Contributions: Water..... Stormwater.....Wastewater..... Transport / Roading..... Community infrastructure.....	
BCA accreditation	12
Total fees (incl. GST) 21.09.16	1425.60
Deposit paid – Date: ~~20/09/16~~.	~~615~~ 615
Remainder fees due:	810.60

REFERRALS:

Structural consultant:
Name:
Sent: Returned:

Structural consultant:
Name:
Sent: Returned:

Other consultant:
Name:
Sent: Returned:

Other consultant:
Name:
Sent: Returned:

NZ Fire Service:
Name:
Sent: Returned:

Historic Places Trust: (Notification)
Date advised:

ADDITIONAL NOTES AND / OR FEES:
paid ~~$615~~

Planning Officer:
Date:

Building Officer:
Date: 19.10.16.

Engineer:
Date:

CHECKED BY: Karan
Officer:
Date: 19/10/16.

ISSUED BY:
Officer:
Date: 19-10-16

Receipt No.: ~~06786589~~

Receipt No.: ~~06785823~~ 06785823

Receipt No.: 6805274