



# Form 6 APPLICATION FOR CODE COMPLIANCE CERTIFICATE

## Section 92, Building Act 2004

### THE BUILDING CONSENT

Building consent number: \_\_\_\_\_

Issued by *[name of building consent authority that granted building consent]*: South Waikato District Council

### THE OWNER

Name of owner *[include preferred form of address, eg, Mr, Miss, Dr, if an individual]*:

Contact person *[if the applicant is not an individual]*: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Street address/registered office: \_\_\_\_\_

Phone number: Landline: \_\_\_\_\_ Mobile: \_\_\_\_\_

Daytime: \_\_\_\_\_ After hours: \_\_\_\_\_

Facsimile number: \_\_\_\_\_

Email address: \_\_\_\_\_ Website *[if applicable]*: \_\_\_\_\_

The following evidence of ownership is attached to this application *[copy of certificate of title, lease, agreement for sale and purchase, or other document showing full name of legal owner(s) of the building]*:

\_\_\_\_\_

### AGENT

*[Only complete this section if the application is being made on behalf of the owner]*

Name of agent: \_\_\_\_\_

Contact person *[if the agent is not an individual]*: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Street address/registered office: \_\_\_\_\_

Phone number: Landline: \_\_\_\_\_ Mobile: \_\_\_\_\_

Daytime: \_\_\_\_\_ After hours: \_\_\_\_\_

Facsimile number: \_\_\_\_\_

Email address: \_\_\_\_\_ Website *[if applicable]*: \_\_\_\_\_

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

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First point of contact for communications with the council/building consent authority [state full name, mailing address, phone number(s), facsimile number(s), and email address(es). Contact details must be in New Zealand]:

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## APPLICATION

All building work to be carried out under the above building consent was completed on [insert date]: \_\_\_\_\_

The licensed building practitioner(s) who carried out or supervised the restricted building work is/are as follows:

Name	Licensing class	Licensed building practitioner number (or registration number if treated as being licensed under section 291 of Building Act 2004)	Particular work carried out or supervised

The personnel who carried out building work other than restricted building work are as follows:

[List names, addresses, telephone numbers, and (where relevant and if not provided above) licensed building practitioner numbers or Plumbers, Gasfitters, and Drainlayers Board registration numbers]

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**Note:** continue on another page if necessary

The following specified systems are contained on the compliance schedule for the building and, in the opinion of the personnel who installed them, are capable of performing to the performance standards set out in the building consent:

[list specified systems]

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I request that you issue a code compliance certificate for this work under section 95 of the Building Act 2004.

The code compliance certificate should be sent to: [state which address, and whether owner or agent]

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Signature of owner/agent on behalf of and with the authority of the owner [delete one]: \_\_\_\_\_

Name of person signing: \_\_\_\_\_

Date: \_\_\_\_\_

## ATTACHMENTS

The following documents are attached to this application:

- Memoranda (Records of Building Work) from licensed building practitioner(s) stating what restricted building work they carried out or supervised
- Other documents from the personnel who carried out the work
- Evidence that specified systems are capable of performing to the performance standards set out in the building consent