

APPLICATION FOR CERTIFICATE OF ACCEPTANCE

Section 97 Building Act 2004

COUNCIL USE ONLY

Application No:

If the information requested does not fit in the box provided, please indicate this on the form, and submit the remaining information as a separate pdf, showing clearly your name, application address and the application and question you are answering

Adobe Acrobat V11 is required to fill this form online
Download for free  <http://get.adobe.com/reader/>

Send or deliver your application to: Environmental Consents Division, Hutt City Council,
Private Bag 31912, LOWER HUTT 5040. For enquiries, phone (04) 570 6666

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

I request that you mail the certificate to me OR I will collect the certificate

THE BUILDING *(project location)*

Building name: <i>[if applicable]</i>	
Building street address:	
Legal description of land where building is located: <i>[state legal description as at the date of application and if subdivision is proposed, include details of relevant lot numbers and subdivision consent]</i>	
Location of building within site: <i>[include nearest street access]</i>	
Number of levels: <i>[include ground level and any levels below ground level]</i>	Level/unit number: <i>[if applicable]</i>
Area: <i>[in sq metres]</i>	
Existing floor area: <input type="text"/>	Proposed floor area: <input type="text"/> Total floor area: <input type="text"/>
Current, lawfully established use: <i>[include number of occupants per level and per use if more than one level]</i>	
Year first constructed: <i>[insert year, approximate date is acceptable e.g. 1920 or 1960 - 1970]</i>	

THE PROJECT

Description of proposed building work: <i>[provide enough information regarding scope of work to enable a full understanding of building work proposed]</i>	
Restricted building work applicable <input type="checkbox"/> Yes	Date building work carried out:
Did the building work result in a change of use of the building? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, provide brief details of new use:	
Intended life of building if less than 50 years:	Estimated value of building work on which building levy will be calculated: <i>[includes GST]</i>
Does the building or site have any cultural heritage significance, or is it a marae? <i>[refer to district plan]</i> <input type="checkbox"/> Yes <input type="checkbox"/> No	List building consents previously issued for this project: <i>[who issued, date and consent number]</i>

THE OWNER *(must be completed and all details must be the owner's)*

Owner's name: <i>[for individuals, state the preferred form of title e.g. Mr, Mrs, Ms, Miss Dr. For companies, trusts and other organisations provide a contact person's name.]</i>		
Owner's mailing address:		
Street address/registered office:		
Owner's contact details:	Landline:	Mobile:
	After hours:	Fax:
	Email:	
Proof of ownership: <i>[please attach one of the following as evidence, as appropriate to the circumstances]</i>		
<input type="checkbox"/> Copy of certificate of title, no more than three months old. <input type="checkbox"/> Lease <input type="checkbox"/> Agreement for sale and purchase		

THE OWNER'S AGENT *(only required if application is being made on behalf of the owner)*

Agent's name: <i>[for individuals, state the preferred form of title e.g. Mr, Mrs, Ms, Miss Dr. For companies, trusts and other organisations provide a contact person's name.]</i>		
Agent's mailing address:		
Street address/registered office:		
Agent's contact details:	Landline:	Mobile:
	After hours:	Fax:
	Email:	
Relationship to owner: <i>[state the details of the owner's authorisation if making this application on the owner's behalf]</i>		
First point of contact: <i>[tick boxes as appropriate and provide details of any other points of contact]</i>		
<input type="checkbox"/> Further information. <input type="checkbox"/> Correspondence <input type="checkbox"/> Invoicing		

SIGNATURES

<p>Signed by the owner:</p> <p>Signature:</p> <p>Printed Name:</p> <p>Date:</p>	OR	<p>Signed by the agent: (on behalf of, or with authority from, the owner)</p> <p>Signature:</p> <p>Printed Name:</p> <p>Date:</p>
--	-----------	--

PRIVACY STATEMENT

The council may hold, use and disclose personal information you have provided:

- to communicate with you for council purposes;
- to tell you about products and services it believes may be of interest to you; and
- to enable it to maintain its records and carry out its statutory functions.

You have the right under the Privacy Act 1993 to access, and have corrected, information held by the council, which is at 30 Laings Road, Lower Hutt 5040, (ph 04 570 6666)

LICENSED BUILDING PRACTITIONERS (LBPs) ENGAGED TO CARRY OUT/SUPERVISE RESTRICTED BUILDING WORK

Particular work to be carried out or supervised	Name of LBP	Licensing class of LBP	Licensed building practitioner number <i>[or registration number if treated as being licensed under section 291 of Act]</i>

CONTACTS *(provide all details where relevant)*

Designer/architect contact details:	Business/name:	Landline:
	Registration no:	Mobile:
	Address:	After hours:
	Email:	
Structural engineer contact details:	Business/name:	Landline:
	Registration no:	Mobile:
	Address:	After hours:
	Email:	
Builder contact details:	Business/name:	Landline:
	Registration no:	Mobile:
	Address:	After hours:
	Email:	
Other's contact details: <i>[fire engineer, plumber/drainlayer etc.]</i>	Business/name:	Landline:
	Registration no:	Mobile:
	Address:	After hours:
	Email:	

COUNCIL USE ONLY:	<input type="checkbox"/> LBP(s) checked	Memorandums included & acceptable	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Comments:				
.....				
.....				

DOCUMENTATION (all plans and specifications must meet minimum requirements as set out by the BCA)

Plans and specifications that are attached to this application: <i>[tick relevant boxes]</i>	<input type="checkbox"/> Plans	<input type="checkbox"/> Producer statements
	<input type="checkbox"/> Specifications	<input type="checkbox"/> LBP memorandums
	<input type="checkbox"/> Calculations	<input type="checkbox"/> Other <i>[specify]</i>

REASONS WHY A CERTIFICATE OF ACCEPTANCE IS REQUIRED (tick relevant boxes)

<input type="checkbox"/>	The owner, or the owner's predecessor in title, carried out building work for which a building consent was required, but a building consent was not obtained because: <i>[explain]</i>
<input type="checkbox"/>	A building consent could not practicably be obtained in advance because the building work had to be carried out urgently: <i>[delete one of the following]</i> [a] for the purpose of saving or protecting life or health or preventing serious damage to property as follows: <i>[explain]</i> [b] in order to ensure that a specified system was maintained in a safe condition or made safe as follows: <i>[explain]</i>
<input type="checkbox"/>	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 issue a code compliance certificate for the building work: <i>[give details of BCA and consent number]</i>

ATTACHMENTS (tick relevant boxes)

<input type="checkbox"/>	Plans and specifications
<input type="checkbox"/>	Certificates from personnel who carried out the building work
<input type="checkbox"/>	Energy work certificate
<input type="checkbox"/>	Disposal of stormwater and wastewater
<input type="checkbox"/>	Building work over any existing drains or sewers or in close proximity to wells or water mains
<input type="checkbox"/>	Licensed building practitioners memoranda relating to restricted building work carried out or supervised
<input type="checkbox"/>	Other matters known to applicant that may require authorisation from Hutt City Council <i>[specify]</i>

COMPLIANCE SCHEDULE

There are no specified systems in the building

OR

The following specified systems are existing, new, have been altered, added to, or removed in the course of the building work:

		Existing	New	Altered	Added	Removed
SS1	Automatic systems for fire suppression (e.g. sprinkler systems)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SS3	Electromagnetic or automatic doors or windows (e.g. ones that close on fire alarm activation)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SS4	Emergency lighting systems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SS5	Escape route pressurisation systems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SS6	Riser mains for use by fire services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SS7	Automatic backflow preventers connected to a potable water supply	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SS8	Lifts, escalators, travelators or other systems for moving people or goods within buildings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SS9	Mechanical ventilation and air conditioning systems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SS10	Building maintenance units providing access to exterior and interior walls of buildings	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SS11	Laboratory fume cupboards	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SS12	Audio loops or other assistive listening systems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SS13	Smoke control systems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SS14	Emergency power systems for, or signs relating to, a system or feature specified above	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SS15	Other fire safety systems or features	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SS15/1	Systems for communicating spoken information intended to facilitate evacuation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SS15/2	Final exits	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SS15/3	Fire separations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SS15/4	Signs for communicating information intended to facilitate evacuation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SS15/5	Smoke separations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SS16	Cable Car	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>