


APPLICATION FOR CERTIFICATE FOR PUBLIC USE



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**Section 363A, BUILDING ACT 2004
FORM 15**

OFFICE USE				
Date Received Stamp				
Property Number				
<i>E</i>			<i>N</i>	
PIM Receipt Number				



THIS FORM CAN BE USED TO APPLY FOR A CERTIFICATE FOR PUBLIC USE

Complete this form in full

Lodge the application at the Blenheim office or
E-mail to Building Control at: buildingconsents@marlborough.govt.nz
Applications that are incomplete will be returned to the applicant.

MARLBOROUGH DISTRICT COUNCIL

BLENHEIM
Seymour Street
PO Box 443
Blenheim 7240
Ph: (03) 520 7400
Email: mdc@marlborough.govt.nz

PICTON
67 High Street
Picton 7220
Ph: (03) 520 7493
website: www.marlborough.govt.nz

APPLICATION FOR CERTIFICATE FOR PUBLIC USE

Premises/Part of Premises

Description of Premises/Part of Premises for which Certificate is sought:

[Identify the building in which the premises or part of the premises are located and describe those premises or that part of the premises. If appropriate, provide plans or diagrams that clearly delineate the premises of part of the premises.]

Building Work Affecting Premises/Part of Premises

Building Consent Number(s): _____

Issued by: Marlborough District Council

Applicant *[person who owns, occupies or controls premises]*

Full Name of Applicant: *[include preferred form of title, eg Mr, Miss, Dr if an individual and the contact person's name if a company, trust or similar]*

Applicant's Mailing Address:

Street Address/Registered Office:

Applicant's Contact Details:

Telephone number: _____

Mobile: _____

Facsimile number: _____

After Hours: _____

Email Address: _____

The following evidence of the applicant's status as owner/occupier/person in control is attached to this

application: *[eg copy of Record of Title, Lease, Agreement for Sale and Purchase, Licence or Property Management Agreement being a document that shows the full name of the applicant]*

Proof of ownership:

I have provided a Record of Title *(no older than 90 days)* OR

Marlborough District Council to provide a Record of Title

If the applicant is not the legal owner as stated on the Title or Rates Demand, please also provide:

A signed Sales and Purchase Agreement or

Signed Lease Agreement; and

Letter of approval from the Lessor

Owner

Full Name of Owner(s): *[include preferred form of title, eg Mr, Miss, Dr if an individual and the contact person's name if a company, trust or similar]*

Owner's Mailing Address:

Street Address/Registered Office:

Owner's Contact Details:	
Telephone number: _____	Mobile: _____
Facsimile number: _____	After Hours: _____
Email Address: _____	

Agent *[only required if application is being made on behalf of the owner]*

Name of Agent: *[include the contact person's name if a company, trust or similar] - Note: the agent will be the first point of contact for communications with the Council/Building Consent Authority regarding this application/building work.*

PLEASE NOTE: The Fee Payer for the associated Building Consent will receive the invoice for this Certificate for Public Use.

Agent's Mailing Address:	Street Address/Registered Office:
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Agent's Contact Details:	
Telephone number: _____	Mobile: _____
Facsimile number: _____	After Hours: _____
Email Address: _____	

Relationship with Owner/Occupier/Person in Control of Premises:
[state details of authorisation from the owner/occupier/ person in control of premises to make the application on the person's behalf]

Application

1. I confirm that No Code Compliance Certificate has been Issued for the Building Work: Yes

2. It is intended to permit members of the public to use the premises/part of the premises described above for the following purposes and in the following circumstances: *[describe purposes and circumstances]*

3. Members of the public can use the premises/part of the premises described above safely because: *[state reasons for the statement, and include any precautions taken to protect the public, information on any specified systems in the premises or part of the premises, and the management of any special risks (eg means of escape from fire) on site (provide information in attachments, if necessary)]*

Certificate of Public Use Duration:

4. Requested Timeframe for CPU:
[Specify the Timeframe for which CPU is required for in either Months or Specify the Finish Date till the CPU is required for]

(Note: The BCA may place limitations on the duration of the CPU, after which date a further application for CPU may be required).

Application

5. Personnel who carried out the building work are as follows:

Name	Address	Phone Number	LBP or Registration No

6. I request you issue, under Section 363A(2) of the Building Act 2004, a Certificate for Public Use for the premises or the part of the premises described above.

Information collected with this application and subsequent procedures is legally public information and will be released to any person on request.

The applicant must be the owner of the land on which the building work is to take place or a person who has agreed, by formal Sale and Purchase Agreement to purchase the land, or any leasehold estate, or to take a lease of the land, while the agreement remains in force.

Council will charge interest on overdue invoices at 15% per annum from the date of issue to the date of payment. In the event of non payment the applicant and/or agent will be liable for all legal and other costs of recovery. Request for inspection may be refused if all fees are not paid.

I certify that the information provided in this application is correct and I accept the above terms and conditions.

I have read and understood the terms and conditions above: I agree

Name of Person Signing: _____ **Date:** _____

Signature of Authorised Person: _____

*[owner/occupier/person in control of premises/agent on behalf of, and with the authority of, the *owner/occupier/person]*

Attachments

The following documents are attached to this application: *[tick boxes applicable]*

- Evidence of applicant's status
- Plans and diagrams showing the premises or part of the premises described above
- Documentation relevant to the safety of the premises/part of the premises (e.g., an engineer's report, certificates concerning specified systems)

The information on this form is required to be provided under the Building Act 2004. A failure to disclose this information means the Marlborough District Council will not be able to process your application. Council holds and stores the information, including the form and all associated reports and attachments, on the Council property file and internally by the Council. If you would like to request access to, or correct any details, please contact us.

The details of your application and any related communications will be made available to the public on the Council property files. If there is any communication or information that you would like to remain confidential, please note this in your communications with Council officers, or contact the Council's Privacy Officer at privacy@marlborough.govt.nz. Please note that your (the applicant) main details (name and address) cannot be confidential.

For further information on your privacy rights, please see the Council's [Privacy Statement](#).

Declaration

I am

- the owner of the building
- the representative of the owner of the building and have their written approval to act on their behalf
- _____ [other – please specify]

and confirm that all information in this application is true and correct and that I have read, understood and agree to the above terms and conditions.

Signature

Name

Date