

APPLICATION FOR PROJECT INFORMATION MEMORANDUM AND/OR BUILDING CONSENT PLUMBING / DRAINAGE AND SOLAR PANELS

S33 AND S45, BUILDING ACT 2004
FORM 2

OFFICE USE

Date Received Stamp

Property Number

E			N	
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PIM Receipt Number



THIS FORM CAN BE USED TO APPLY FOR ANY OF THE FOLLOWING:

- (a) Building consent only
- (b) project information memorandum and building consent for work containing plumbing / drainage and solar panel installation only

Complete the form in full and lodge with completed application checklists

Lodge the application at the Blenheim office or mail with the Project Information Memorandum fee (where a Project Information Memorandum is required) to the Blenheim office.

Mailed applications that are incomplete or do not include the PIM fees 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 CHECKLISTS

Your application must include a fully completed application checklist. Provide at least one of the following:

- BAC0002.7 Plumbing/Drainage
- BAC0002.10 Solar panel installation work

FEES

Government Levies, Building Consent and PIM Fees

Fees for the Building Consent are additional to the Project Information Memorandum fee. Building Consent and PIM fees are set in accordance with the standard Marlborough District Council fees. Building Consent and PIM fees will be invoiced at the time the Building Consent issued. All PIM and Building fees and charges are listed in full on the Council website.

Website: www.marlborough.govt.nz

PLANS

Good plans are required and are essential. Plans and specifications must accurately describe and show the proposed building work. They must show sufficient information so that the Council can determine exactly how the building is to be constructed and what materials are to be used. Plans should clearly show how compliance with the NZ Building Code is achieved and how compliance with the Council Resource Management Plans are met.

All components of the building should be covered and the application will be delayed if missing items have to be requested.

The preparation of plans is a skilled job and unless you know the NZ Building Code and how to draw plans then we recommend that you seek the services of a trained professional.

APPLICATION FORMAT

Applications should include all of the relevant documentation called for in the application checklist, including the checklist itself, and a fully completed application form. Applications must be fully complete otherwise they are likely to be returned unprocessed. Electronic applications are preferred. Applications should be lodged on disk. Please do not lodge applications on memory sticks. Paper copies are **not** wanted if the application is lodged electronically.

The electronic format for the applications should be PDF for preference. Documents produced in Word or Excel can be lodged in those formats.

Where colour coding is used for highlighting details or other items (such as truss layouts) please provide those in colour.

When saving documents for lodgment we would prefer that they be saved as single PDF documents for each group. For example, save all plans as a single document. Bookmarking pages is very helpful.

Single paper copies may still be lodged but these will be scanned at the Council before being accepted and processed.

Please do not mix and match applications. Applications should be fully electronic or fully on paper. We will not accept a mixture.

If you know the property number the project is on, then please include the number in your application.

AGENT

Where an agent is acting on behalf of the owner, then the agent will be the first point of contact for all communications regarding the application and construction of the project.

APPLICATION FOR A BUILDING CONSENT AND/OR PROJECT INFORMATION MEMORANDUM

Application

I request that you issue a:

Existing PIM number: (attach a copy)

The Building [Project Location]

Street address of building:

Legal description of land where building is located:
[state legal description as at the date of application and, if subdivision is proposed include details of relevant lot numbers and subdivision consent]

Building Name: *[if applicable]*

Location of building within site: *[include nearest street access]*

The Project

Description of the building work: *[provide sufficient description of building work to enable scope of work to be fully understood]*

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

If yes, provide details of the new use:

Estimated value of the building work on which the building levy will be calculated (including goods and services tax): *[state estimated value as defined in section 7 of the Building Act 2004]*

\$ _____

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

Current, lawfully established, use: *[include number of occupants per level and per use if more than 1 level]*

Enter NA if not applicable

Intended life of the building if less than 50 years:

_____ years

Year first constructed: *[insert year, approximate date is acceptable eg c1920s or 1960-1970]*

The Owner *[Must be completed for all applications and all details must be the owners]*

Name of Owner/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]*

Owner's mailing address:

Street address/Registered Office:

Owner's contact details:

Telephone number: _____

Mobile: _____

Facsimile number: _____

After Hours _____

Email: _____

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

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 and will receive all correspondence including all invoices.*

Agent's mailing address:

Street address/Registered Office:

Agent's contact details:

Telephone number: _____

Mobile: _____

Facsimile number: _____

After Hours _____

Email: _____

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

Restricted Building Work

Will the building work include any restricted building work?

If Yes, provide the following details of all licensed building practitioners who will be involved in carrying out or supervising the restricted work: *[if these details are unknown at the time of the application, they must be supplied before the work begins]*

Name	Licensing Class	Licensed Building Practitioner Number (or registration number if treated as being licensed under Section 291 of the Building Act 2004)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Contacts *[Provide details of all personnel and include LBP or registration number]*

Designer/Architect: Business/name: _____ Address: _____ Daytime: _____ Mobile: _____ After Hours: _____ Facsimile: _____ Registration/LBP No: _____	Chartered Professional Engineer: Business/name: _____ Address: _____ Daytime: _____ Mobile: _____ After Hours: _____ Facsimile: _____ CP Eng No: _____ Practice College: _____
Waste Water System Designer: Business/name: _____ Address: _____ Daytime: _____ Mobile: _____ After Hours: _____ Facsimile: _____ Registration/Qualification: _____	Certifying Plumber: Business/name: _____ Address: _____ Daytime: _____ Mobile: _____ After Hours: _____ Facsimile: _____ Registration No: _____
Carpenter: Business/name: _____ Address: _____ Daytime: _____ Mobile: _____ After Hours: _____ Facsimile: _____ LBP No: _____	Certified Drainlayer: Business/name: _____ Address: _____ Daytime: _____ Mobile: _____ After Hours: _____ Facsimile: _____ Licence No: _____
Roofer: Business/name: _____ Address: _____ Daytime: _____ Mobile: _____ After Hours: _____ Facsimile: _____ LBP No: _____	Bricklayer or Blocklayer: Business/name: _____ Address: _____ Daytime: _____ Mobile: _____ After Hours: _____ Facsimile: _____ LBP No: _____

The following matters are involved in the project: *[tick boxes applicable]*

- Subdivision
- Alterations to land contours
- New or altered connections to public utilities
- New or altered access for vehicles
- Building work over or adjacent to any road or public place
- Disposal of stormwater and wastewater
- Building work over any existing drains or sewers or in close proximity to wells or water mains
- Other matters known to the applicant that may require authorisations from the territorial authority

[please specify]

What clauses of the Building Code does your building work comply with?

Please read the following carefully:

- *You are required to indicate what Code clause(s) your building work complies with.*
- *Unless otherwise noted below, your application will be assessed under Acceptable Solutions.*
- *If you are using another means of compliance, please provide details of the standard(s) that your building work complies with and the means of compliance in the space provided. Use a separate sheet of paper if necessary.*
- *If you do not provide all the necessary information to show how your application complies with the Building Code, it may be returned unprocessed.*

I understand that this application is to be assessed against Acceptable Solutions, unless otherwise stated in the following section.

- | | |
|---|---|
| <input type="checkbox"/> B1 Structure | <input type="checkbox"/> G10 Piped services |
| <input type="checkbox"/> E1 Surface water | <input type="checkbox"/> G12 Water supplies |
| <input type="checkbox"/> E2 External moisture | <input type="checkbox"/> G13 Foul water |
| <input type="checkbox"/> E3 Internal moisture | <input type="checkbox"/> H1 Energy efficiency |
| <input type="checkbox"/> G1 Personal hygiene | |

Provide details of all Verification Methods being used *(include relevant Code clause and means of compliance)*:

Provide details of all Alternative Solutions being used *(include relevant Code clause and means of compliance)* or details of any waivers and modifications *(including applicable code clauses)*:

Waiver/modification to NZ Building Code required for following parts of Code:

Compliance Schedule

Complete this section if the building will have a compliance schedule or already has one.

		Existing	New	Altered	Removed
SS06(i)	Dry Riser	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SS06(ii)	Charged Riser	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SS07	Backflow Preventers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Address where compliance schedule will be held: