

# Code Compliance Certificate Checklist

ADDRESS OF PROPERTY	25 Taumatawiwi Street, Opononi 0473
CONSENT NUMBER	BC-2006-1192/3
PROJECT DESCRIPTION	New Dwelling
DATE FORM 6 RECEIVED	20/11/18

**TECHNICAL REVIEW - BUILDING OFFICER:**

Aspect	YES	NO	N/A	Comment
If Application is over 4 years old, File to be forwarded for peer review by Team Leader prior to final decision	✓			Peer Reviewed ok
Final inspection <u>passed</u> / failed (Items addressed) green final	✓			
Photographs attached	✓			MANY of Remediation
<b>Final pack items</b>				
<input checked="" type="checkbox"/> Form 6 supplied	✓			
<input type="checkbox"/> Row for residential buildings - NA				
<input type="checkbox"/> Owner builder? (exemption declaration complete) - NA				
<input checked="" type="checkbox"/> List of consultants / Tradespersons complete in full	✓			
<input checked="" type="checkbox"/> Energy works certificate	✓			
<input checked="" type="checkbox"/> Gas certificate	✓			
<input checked="" type="checkbox"/> As laid drainage plans AS PLANS & SURFACE MOUNTED	✓			
<input type="checkbox"/> As built ( minor variations certified on site..... noted)				
<b>All building consent conditions fulfilled</b>				
<input checked="" type="checkbox"/> Section 67 wavers and Modifications B2.	✓			
<input type="checkbox"/> Section 72 natural hazards				
<input type="checkbox"/> Section 75 two or more allotments				
<input checked="" type="checkbox"/> Section 90 inspections	✓			
<input checked="" type="checkbox"/> Section 113 Specified intended life	✓			
<b>Important and Imperative Information received</b>				
<input type="checkbox"/> Survey certificate (Site specific for location, height or finish floor level)				
<input type="checkbox"/> Producer Statement (PS4) engineer				
<input checked="" type="checkbox"/> Producer Statement (PS3) constructor	✓			
<b>Construction complies with approved building consent</b>				
<input type="checkbox"/> Amended plans necessary?				
<input checked="" type="checkbox"/> Verify project description is accurate	✓			
<b>Amendment application reviewed</b> note BC _____				
<b>Nominated site inspections verified</b>				Nominated: 12 Actual: 04
<b>Swimming pool / spa on site</b>				SPL no: ✓
<input type="checkbox"/> Pool final inspection checklist completed (blue final)				
<b>Commercial only</b>				
<input type="checkbox"/> Specified Systems installed to approved plans				
<input type="checkbox"/> Certification or commissioning statements for S/S (FPIS CERT etc)				
<input type="checkbox"/> Draft C/S verified (further information?)				
<input type="checkbox"/> IQP Identified				

NA

TECHNICAL DECISION:

<p><b>SUSPEND PROCESSING</b> (circle)</p>	<p>Outstanding items are required and are nominated above. (under "NO")</p> <p>Building Officer <u>T. Egan</u> Date: <u>23/5/19</u></p>
<p>General / Follow up Comments (Change of Decision):</p> <p>== all new remedial jobs now completed == all certificates &amp; documents provided</p>	
<p><b>BUILDING IS COMPLIANT TO THE ISSUED CONSENT</b> (circle)</p>	<p>I have checked the information and am "satisfied on reasonable grounds" the building has been completed in accordance with the issued plans and consent. A code compliance certificate may be granted subject to fees etc prior to issuing (admin to verify below).</p> <p>Building Officer <u>T. Egan</u> Date: <u>30/7/19</u></p>
<p><b>REFUSE CCC</b> (circle)</p>	<p>I am not satisfied that code compliance has been achieved (reasons to be attached)</p> <p>Building Officer _____ Date: _____</p>

BC-2006-1192/3

Inspection Type

Date

Results

Officer

On File

Notes

# CCC TRACKING SHEET

CONSENT N°: BC-2006-1192/3

**APPLICANT NAME:** Jeanette Milly England **Date:**  
**PROJECT DESCRIPTION:** New Dwelling  
**LEGAL DESCRIPTION:** LOT 29 DP 61764

**BUILDING SUPPORT OFFICER TO COMPLETE**

T33 attached:	<input checked="" type="checkbox"/>
Signed off by: (officers name)	A. Spooner
Date signed:	30-7-19
DECISION made by officer:	<input checked="" type="checkbox"/> ISSUE CCC <input type="checkbox"/> REFUSE CCC

**RECONCILE INSPECTION FEES / DCFS** (TICK / N/A) (TICK / N/A)

Total number of billable visits:	2	DCFs checked:	NA
Number invoiced to date:	0	Historic / Current debtor details checked:	✓
Number of inspections to be invoiced / credited	2	Invoice or credit note (with claim form) posted:	✓

**TIDY UP BC SCREEN (/0)** (TICK / N/A) (TICK / N/A)

Update final inspection details (if applicable)	✓	Remove all expiry dates	✓
Tidy up 'Inspection' screen	✓	Untick any unnecessary popup memo's	✓
Complete first inspection task if not already done	✓	First inspection / timesheet tasks completed	✓

**TIDY UP CCC SCREEN (/1)** (TICK / N/A) (TICK / N/A)

Update owners postal details from Form 6	✓	CCC documents generated	✓
Current lawful use entered	✓	Untick any unnecessary popup memos	✓
Responsible officer entered	✓	Enter Billable / Non Billable hours	✓
Misc Data / Names / References entered	✓	Compliance Schedule required	NA
All workflow tasks completed	✓	Decision entered	✓
If CPU applies delete expiry date	NA		

**OLDER CCC'S MISCELLANEOUS** (TICK / N/A) (TICK / N/A)

Modification sent to MOBIE	✓	Pool inspector advised of pool	NA
Inspection block in place if CCC is refused	NA	Clock days / status / decision correct	

**NOTES:**

**DOCUMENTS SENT TO ARCHIVES FOR FILING** (TICK / N/A) (TICK / N/A)

Decision – all CCC documentation	NA	Plans documentation	NA
Inspection documentation	✓	Application form	✓
Financial documentation	NA	Processing documentation	✓
Compliance documentation	✓		

**DATE:** 2-8-19 **ASSESSED BY: Initials -** AS **Signature -** [Signature]

## OLDER CCC REVIEW CHECKLIST

<b>CONSENT NUMBER:</b>	BC-2006-1192/0		
<b>ADDRESS OF PROPERTY:</b>	25 Taumatawiwi Street, Opononi 0473		
<b>PROJECT DESCRIPTION:</b>	New Dwelling		
<b>Category:</b> RES / COM	1	2	3
<b>Risk Level:</b>	LOW	MEDIUM	HIGH
<b>Applicable Date Range:</b>	<input type="checkbox"/> 1 <sup>st</sup> July 1992 – 31 <sup>st</sup> March 2005		<input checked="" type="checkbox"/> 31 <sup>st</sup> March 2005 – 4 years old

### TECHNICAL REVIEW - (Prior to booking final inspection)

Aspect	Yes	No	N/A	Comment
Application for CCC received	Yes	No	N/A	
Any Resource Consent conditions	Yes	No	N/A	Inform Compliance Monitoring
Any Building consent conditions	Yes	No	N/A	Date consent issued (post July 1992)
Any Amendments	Yes	No	N/A	Have these been issued / verified / completed?
GEMS print out attached	Yes	No	N/A	Review notes
Any Notice(s) issued	Yes	No	N/A	
Any Producer Statement(s)	Yes	No	N/A	
Any Survey Certificate(s)	Yes	No	N/A	
Any Asbuilt(s)	Yes	No	N/A	
List of trades completed	Yes	No	N/A	
Proceed with Final Inspection	Yes	No	N/A	If NO, state reasons

<u>Important and Imperative Info received</u> Survey certificate, PS4, PS3	Yes	No	N/A	
<u>Construction complies with approved building consent</u> Are amended plans necessary, Verify project description is accurate	Yes	No	N/A	
<u>Commercial only</u> Specified systems to approved plans, Certification or commissioning statements, Draft CS verified, IQP/LBP identified	Yes	No	N/A	
Date building substantially completed (Modification or Waiver applicable?)	Yes	No	N/A	Owner must declare or officer to estimate from inspection records
Enter processing time in Pathways	YES	Compliance Officer must to action		

#### Check these specific items at Final Inspection:

Considerations may include: Foundation, Plumbing & Drainage, Framing, Exterior Envelope, Specific Areas of High Risk, Effluent Disposal, Swimming Pool Register

As build drainage, ecc, check for waste water system no drainage inspection

Previous inspection records – refer attached T33 checklist		
<b>Foundation type</b> <input type="checkbox"/> Nominated <input checked="" type="checkbox"/> Completed		Date :- 25/5/2006 Construction type :- Inspection result :- Pass
<b>Drainage</b> <input type="checkbox"/> Nominated <input type="checkbox"/> Completed		Date :- Construction type :- Inspection result :-
<b>Subfloor</b> <input type="checkbox"/> Nominated <input type="checkbox"/> Completed		Date :- Construction type :- Inspection result :-
<b>Slab / bond beam</b> <input type="checkbox"/> Nominated <input type="checkbox"/> Completed		Date :- Construction type :- Inspection result :-
<b>Preline</b> <input checked="" type="checkbox"/> Nominated <input checked="" type="checkbox"/> Completed		Date :- 8/11/2007 Construction type :- Inspection result :- Pass     insulation - not required as per spec
<b>Framing</b> <input type="checkbox"/> Nominated <input type="checkbox"/> Completed		Date :- Construction type :- Inspection result :-
<b>Flashing / wrap</b> <input type="checkbox"/> Nominated <input type="checkbox"/> Completed		Date :- Construction type :- Inspection result :-
<b>Post line</b> <input type="checkbox"/> Nominated <input type="checkbox"/> Completed		Date :- Construction type :- Inspection result :-
<b>Cavity / cladding</b> <input type="checkbox"/> Nominated <input type="checkbox"/> Completed		Date :- Construction type :- Inspection result :-
<b>Effluent disposal</b> <input type="checkbox"/> Nominated <input type="checkbox"/> Completed		Date :- Construction type :- Inspection result :-
<b>Swimming pool</b> <input type="checkbox"/> Nominated <input type="checkbox"/> Completed		Date :- Construction type :- Inspection result :-
<b>Final</b> <input checked="" type="checkbox"/> Nominated <input type="checkbox"/> Completed		Date :- Construction type :- Inspection result :-

## Raewyn Smythe

---

**From:** Trent Blakeman  
**Sent:** Monday, 22 July 2019 12:13 PM  
**To:** CCC  
**Subject:** FW: fully trap grate  
**Attachments:** IMG\_20190715\_132734.jpg

Hi,

RFI info for BC-2006-1192/3

Cheers



**Trent Blakeman**  
Manager - Building Services

District Services, Far North District Council | **24-hour Contact Centre** 0800 920 029  
ddi +6494070446 | m 027 406 4734 | [Trent.Blakeman@fndc.govt.nz](mailto:Trent.Blakeman@fndc.govt.nz)  
[Website](#) | [Facebook](#) | [LinkedIn](#) | [Careers](#)

---

**From:** Jeanette England  
**Sent:** Wednesday, 17 July 2019 7:27 AM  
**To:** Trent Blakeman  
**Subject:** Fwd: fully trap grate

Sorry about that



**Jeanette England**  
Project Manager - Buildings & Facilities

Infrastructure & Asset Management, Far North District Council | **24-hour Contact Centre** 0800 920 029  
ddi +6494015299 | m +64272362521 | [Jeanette.England@fndc.govt.nz](mailto:Jeanette.England@fndc.govt.nz)  
[Website](#) | [Facebook](#) | [LinkedIn](#) | [Careers](#)

----- Original message -----

**From:** Jeanette England <[Jeanette.England@fndc.govt.nz](mailto:Jeanette.England@fndc.govt.nz)>  
**Date:** 16/07/19 3:55 PM (GMT+12:00)  
**To:** Jeanette England <[Jeanette.England@fndc.govt.nz](mailto:Jeanette.England@fndc.govt.nz)>  
**Subject:**



**Jeanette England**  
Project Manager - Buildings & Facilities

Infrastructure & Asset Management, Far North District Council | **24-hour Contact Centre** 0800 920 029  
ddi +6494015299 | m +64272362521 | [Jeanette.England@fndc.govt.nz](mailto:Jeanette.England@fndc.govt.nz)

[Website](#) | [Facebook](#) | [LinkedIn](#) | [Careers](#)



2006-1192

## Raewyn Smythe

---

**From:** Rod Spooner  
**Sent:** Tuesday, 9 July 2019 12:27 PM  
**To:** CCC  
**Cc:** Raewyn Smythe  
**Subject:** FW: BC-2006-1192/3 - 25 Taumatawiwi Street, Opononi - GK & JM England CCC Photos  
**Attachments:** 25 Taumatawiwi St - England CCC.pdf; Council letter CCC.docx; No.4.pdf

Searched through my emails found these documents .will need to come in next week to examine the photos carefully before granting the CCC

Rod



**Rod Spooner**  
Building Control Officer

District Services, Far North District Council | **24-hour Contact Centre** 0800 920 029  
ddi +6494070431 | m 021534303 | [rod.spooner@fndc.govt.nz](mailto:rod.spooner@fndc.govt.nz)  
[Website](#) | [Facebook](#) | [LinkedIn](#) | [Careers](#)

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**From:** Jeanette England  
**Sent:** Thursday, 27 June 2019 9:34 a.m.  
**To:** CCC  
**Cc:** Raewyn Smythe; Trent Blakeman; 'Simon Grimme'; Rod Spooner  
**Subject:** BC-2006-1192/3 - 25 Taumatawiwi Street, Opononi - GK & JM England CCC Photos

Please see files attached with regard to the CCC letter date 17 May 2019 received from Council to rectify items as listed. I have also attached the letter from Far North Building Consultants Ltd who have outlined the responses to each item.

At the inspection undertaken by Rod Spooner with Simon Grimme in attendance it was agreed that due to the minor nature of the items listed (apart from Electrical and Gas Certificates) that if the items were rectified and photographed they could be send through to Council and if Council were satisfied with this work then another inspection would not be required.

I also note that the garage does not appear on the letter issued 17 May 2019. It was also determined on site that Rod was ok with the work undertaken in the garage and that this would achieve sign off as well.



**Jeanette England**  
Project Manager - Buildings & Facilities

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## Raewyn Smythe

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**Cc:** Raewyn Smythe; Trent Blakeman; 'Simon Grimme'; Rod Spooner  
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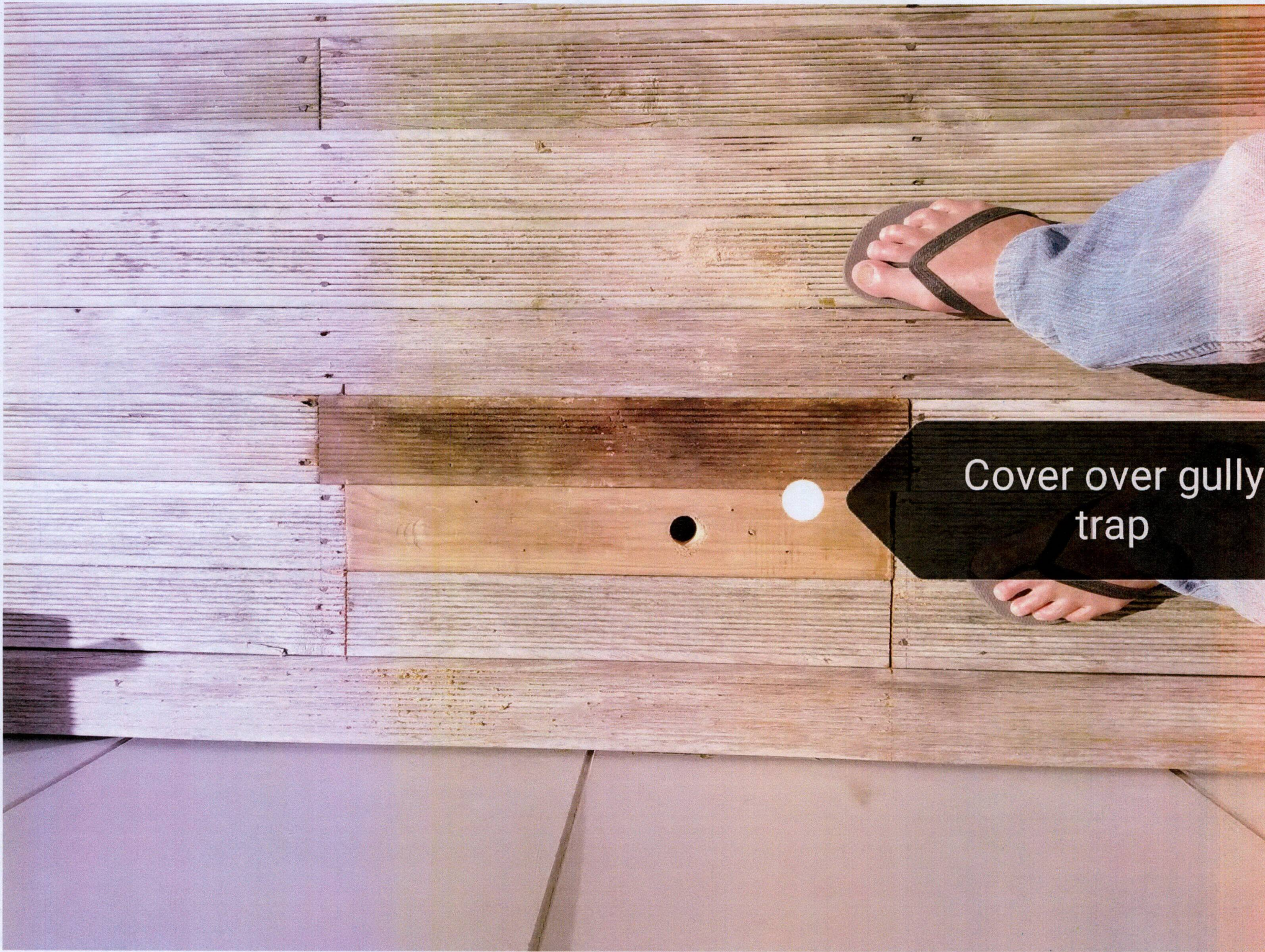


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Project Manager - Buildings & Facilities

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Cover over gully  
trap

Gully trap under deck







Zenith®

**TIMBER**

Countersunk Head Screw  
Phillips Drive

10G x 40mm

QTY: 18

STAINLESS  
STEEL 316

QUALITY





2006-1192



Hemlock





Simon Grimme DipBCS  
685 Puketi Road RD1  
Okaihau 0475  
Tel: 09 4019555  
Tel: 021 1560609  
E-Mail: simon@fnbc.co.nz

20<sup>th</sup> May 2019

Rod Spooner  
Building Officer  
Far North District Council  
Memorial Ave  
Kaikohe

Re: Code Compliance Certification BC-2006-1192

Rod,

The owners have asked that I respond to your Request for Information dated 17<sup>th</sup> May 2019 on their behalf.

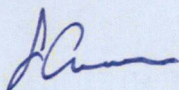
1. PS4 from engineer for foundation (if available) not essential as foundation was inspected by Council. **Rod, a PS4 is not available and the foundations were approved by Council.**
2. Gulley trap to be far more visible and accessible. **Owner will organize.** *Need to be visible.*
3. UV protection around all gas and water serviced where applicable. **Owner will organize.**
4. A copy of the Gas Compliance Certificate is required. **Owner will organize.**
5. A copy of electrical Compliance Certificate is required. **Owner will organize.**
6. A letter from agent confirming panel H1 values match the consented plans is required. **Rod, the Amroc panels have been installed to the engineer's design, the sealed cavity provides the minimum 'R' values as per the Engineers Calculations in the Building Consent.**
7. Simon Grimme to confirm (at site ) the cladding runs above fascia and soffit sufficiently to negate the need for any reverse eave flashings. **Due to the nature of construction the Amroc panels run to the underside of the roof material and as such no reverse soffit flashings are required, the owner can provide you with a photo.**
8. Storm water pipes to be secured under house to prevent downward creep or movement. **Owner to organize.** ✓
9. Top of timber stairs to comply F4 NZBC. **Owner will organize.** *ok.*
10. Surface rust of top of connection panels to be rust protected and re-painted. **Owner will organize.** *ok.*
11. Down pipe clips to be fitted where required (some missing). **These must be fixed to the ply corners rather than thru the Amroc and will be attended to by the owner.** *ok.*

12. Flashing over garage door to comply fully with E2 NZBC. Owner is attending to this and we have sent you details of the proposed rain-screen that will incorporate the required head-flashing and cladding to lining corner flashings as described on-site.
13. Boxed corners to be sealed and painted better. Owner will attend to this.
14. Seal and paint negative detail joints in AMROCK exterior panels. Owner will attend to this.
15. Seal all relevant wall and floor services in the bathroom area. Owner will attend to this.
16. Fit smoke alarms in accordance with F7 NZBC. Owner will attend to this.
17. Seal and paint around kitchen sink to comply G3 NZBC. Owner will attend to this.
18. Provide a copy of the As Built Drainage Plan. Owner will attend to this.
19. Veranda stringer connections to comply NZS 3604. Rod the design is SED and not to NZS3604 but the verandah stringers must all be 'packed' away from the cladding to provide a drainage gap/path. Owner to attend to this.
20. Provide a PS3 from plumber drain layer if available. Unfortunately, this is not available however the P&D is easily accessible via the sub-floor.
21. Resource consent issues to be checked by planning staff
22. Rebook an inspection by phoning 0800 920029 or 09 4015200 and quoting your Building Consent Number BC-2006-1192/3.

## **Summary**

**Far North Building Consultants Ltd are of the view that the construction of this alternative solution specifically engineered building complies with the provisions of the Building Code applicable at the time of its construction and the Building Consent. Further, with the completion of the items above we believe it is appropriate for a Code Compliance Certificate to be Issued with a modification to the Durability dated to substantial completion on the 8<sup>th</sup> November 2007.**

Yours faithfully



Simon Grimme (DipBCS)  
Director  
**Far North Building Consultants Ltd**

## Rod Spooner

---

**From:** Rod Spooner  
**Sent:** Tuesday, 14 May 2019 10:29 a.m.  
**To:** Greg Machin  
**Subject:** OLD CCC final 25 Taumatawiwi Street BC 2006-1192 ( DRAFT ONLY ) res 3 SED engineered dwelling and garage ( PEER REVIEW PRIOR TO SENDING TO CCC @ FNDC )

This final property file has been mislaid during the office re-shuffle last Friday ( shelves removed ) etc ( Pete Martin saw them both on my desk 04-05-2019 )

This file relates to an old BC that has had CCC refused on 2 previous occasions August 2012 and Nov 2018 by Kevin Piper .

I carried out an inspection at the address with agent Simon Grimme 021 1560609 as Kevin was sick that day .

The following is a list of remedial items I believe need addressing prior to Re-inspection by council with the view to issuing the CCC .

1. PS4 from engineer for foundation ( if available ) not essential as foundation was inspected by council
2. Gully trap to be far more visible and accessible
3. UV protection around all gas and water serviced where applicable
4. Copy of Gas Cert
5. Copy of electrical C.O.C.
6. Letter from agent confirming panel H1 values match the consented plans
7. Simon to confirm ( at site ) the cladding runs above fascia and soffit sufficiently to negate the need for any reverse eave flashings
8. Storm water pipes to be secured under house to prevent downward creep or movement .
9. Top of timber stairs to comply F4 NZBC ~~where above 1M above the ground level~~
10. Surface rust of top of connection panels to be rust protected and re- painted .
11. Down pipe clips to be fitted where required ( some missing ) .
12. Flashing over garage door to comply fully with E2 NZBC .
13. Boxed corners to be sealed and painted better
14. Seal and paint negative detail joints in AMROCK exterior panels.
15. Seal all relevant wall and floor services in the bathroom area. -
16. Fit smoke alarms in accordance with F7 NZBC
17. Seal and paint around kitchen sink to comply G3 NZBC .
18. Copy of as built drainage plan
19. Veranda stringer connections to comply NZS 3604
20. PS3 from plumber drain layer if available
21. ~~Garage floor installed by current owners ( not to be included in the BC CCC documents ) .~~
22. Resource consent issues to be checked by planning staff

*MV required for Concrete Garage floor*

Regards



**Rod Spooner**

**Building Control Officer**

District Services, Far North District Council | 24-hour Contact Centre 0800 920 029

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Website | Facebook | LinkedIn | Careers

*not email*  
**E-MAILED**  
17-5-19



17 May 2019

Jeanette Milly England  
PO Box 171  
Opononi 0445

**Building Consent Number:** BC-2006-1192/3  
**Address:** 25 Taumatawiwi Street, Opononi 0473  
**Property ID:** 3327853  
**Description:** New Dwelling

Dear Sir / Madam,

### Final Inspection Review

A final inspection of your building project was carried out and the following items will need to be actioned before Code Compliance can be signed off:

1. PS4 from engineer for foundation (if available) not essential as foundation was inspected by Council.
2. Gulley trap to be far more visible and accessible. ✕
3. UV protection around all gas and water serviced where applicable. ?
4. A copy of the Gas Compliance Certificate is required. ✓
5. A copy of electrical Compliance Certificate is required. ✓
6. A letter from agent confirming panel H1 values match the consented plans is required.
7. Simon Grimme to confirm (at site ) the cladding runs above fascia and soffit sufficiently to negate the need for any reverse eave flashings. ✓
8. Storm water pipes to be secured under house to prevent downward creep or movement. ✓
9. Top of timber stairs to comply F4 NZBC. ✓
10. Surface rust of top of connection panels to be rust protected and re-painted. ✓
11. Down pipe clips to be fitted where required (some missing). ✓
12. Flashing over garage door to comply fully with E2 NZBC. ✓
13. Boxed corners to be sealed and painted better.
14. Seal and paint negative detail joints in AMROCK exterior panels. ✓
15. Seal all relevant wall and floor services in the bathroom area.
16. Fit smoke alarms in accordance with F7 NZBC.
17. Seal and paint around kitchen sink to comply G3 NZBC. ✓
18. Provide a copy of the As Built Drainage Plan.
19. Veranda stringer connections to comply NZS 3604. ✓
20. Provide a PS3 from plumber drain layer if available.
21. Resource consent issues to be checked by planning staff
22. Rebook an inspection by phoning 0800 920029 or 09 4015200 and quoting your Building Consent Number **BC-2006-1192/3**.

*POB to do final. —*

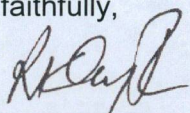
To ensure your Code Compliance Certificate can proceed in a timely manner, documentation requested can either be:

- emailed to [ccc@fndc.govt.nz](mailto:ccc@fndc.govt.nz)
- posted in to Private Bag 752, Memorial Ave, Kaikohe 0440
- dropped off at one of our Service Centres or
- handed to the Building Officer if a re-inspection is required.

If you have any questions please contact the Building Team on 0800 920 029 or 09 401 5200.

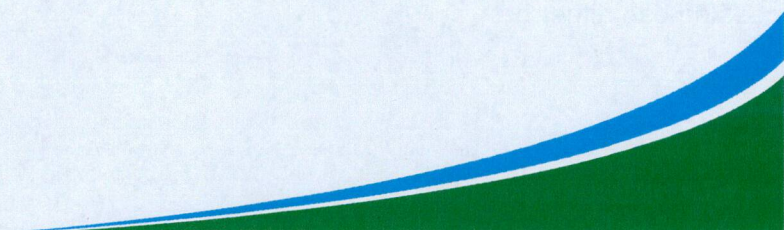
Yours faithfully,

p.p.



Rodney Spooner  
Building Control Officer  
**District Services**

Emailed to: [gkjmengland@hotmail.co.nz](mailto:gkjmengland@hotmail.co.nz)

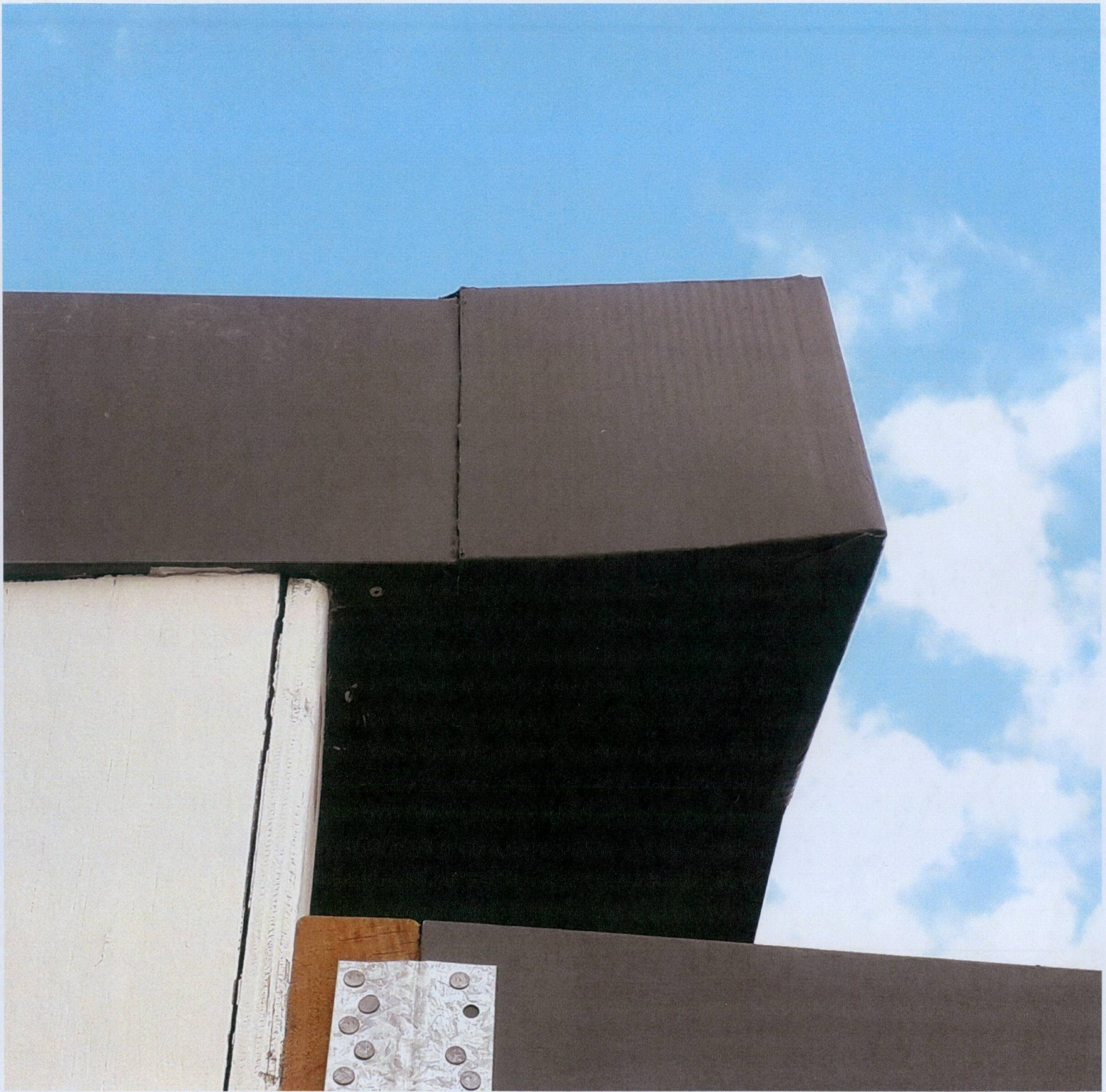


2006-1192



Item 10







# Combined Certificate of Compliance and Electrical Safety Certificate

Unique ID: 2018-248

Note: If you are using this form to provide only an Electrical Safety Certificate, then only complete sections 1, 3 and 5

## 1. Customer Information

Customer Name: JK & JM England

Customer Phone / Email: 027 276 0026

Location of Installation: 25 TAHMATAWAHI OPONONI

## 2. Certifier Information

Certifier Name: MARU SINCLAR Registration / Practising Licence Number: E11983

Organisation: GOODPOWER ELECTRICAL Telephone Number: 0275767625

Email: GOODPOWERHOKI2@gmail.com

Name and Registration Number of person(s) involved in work and supervised by certifier:

## 3. Details of work to which certificate applies

The work is:  an entire installation  a specific part of an installation

The work is:  High Risk  General  Low Risk (Certificate of Compliance not required)

Indicate the number of each item installed or altered:

Number of lighting outlets: 9  
Number of socket outlets: 12  
Number of ranges: 1  
Number of water heaters: N/A

General Description of Work

TO TEST POWER AND LIGHT CIRCUITS AND UPGRADE SWITCH BOARD CHECK & TEST ALL CIRCUITS.

Tick (✓) if work includes:

- Mains  
 MEN switchboard closest to point of supply  
 Main Earthing System  
 Electric Lines

Period within / Date on which the work was done: 19/6/2019

The work is safe to be connected to:  230/400V MEN System  Other (specify)

## 4. Certificate of Compliance

I am satisfied that the work to which this Certificate of Compliance applies has been done lawfully and safely and the information in this certificate is correct. The work:

- complies with Part 1 of AS/NZ 3000  complies with Part 2 of AS/NZ 3000  
 complies with the following standard(s):  
 has been installed in accordance with a certified design (attach or reference\*)  
 has an earthing system that is correctly rated  
 contains fittings which are safe to connect to a power supply  
 relies on supplier's Declaration of Conformity (attach or reference\*)  
 relies on manufacturer's instructions (attach or reference\*)  
 has been satisfactorily tested in accordance with Electricity (Safety) Regulations 2010  
 is safe to connect

### Test Results:

	Electrical Worker	Inspector
Polarity (independent earth):	GOOD	
Insulation resistance:	2500MΩ	
Earth continuity:	5	
Bonding:	2	
Other (specify):		

ATM SMCET

Electronic reference:

Certifier's Signature: *Maru Sinclar*

Date: 19/6/19

\* If it is impractical to attach a copy of any relevant certified design, manufacturer's instruction or supplier declaration of conformity, provide a reference to where the documents can be found, in a readily accessible format, through electronic means.

## 5. Electrical Safety Certificate

Date on which the connection was done: 19/6/19

I am satisfied that the work to which this Electrical Safety Certificate applies is connected to a power supply and is safe to use

Name: MARU SINCLAR

Registration / Practising License Number:

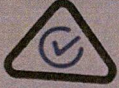
Signature of Connector: *Maru Sinclar*

Date: 19/6/19



TEST SMEGR

Reference/Certificate Id No: 2018-248



This Electrical Safety Certificate provides a legally recognisable statement that the connected installation or part installation, or any fitting that supplies an installation or a part of an installation, is safe to use following prescribed electrical work.

**LOCATION AND CONTACT**

Location Details: 25 TAUMATAWIKI ST  
 Contact Name: JK EJM ENGLAND  
 Contact Address: OPONONI  
 Postcode: 0445

**DETAILS**

Details of Work:  Electrician  Electrical Appliance Serviceperson

Description of Work

LOOP TEST MAINS .52 Ω  
 INSULATION TEST POWER OUTLETS CIRCUITS 1, > 500 MΩ  
 2, > 500 MΩ  
 3, > 500 MΩ  
 LIGHT CIRCUITS 4, > 500 MΩ  
 1, > 500 MΩ  
 2, > 500 MΩ  
 RCD TEST  
 RCD 1  
 1x 40, 38 m/s 24 mA  
 5x ~~25~~ 34 m/s  
 RCD 2  
 1x 25 34 m/s 24 mA  
 5x 7 12 m/s  
 GARAGE  
 POWER > 500 MΩ  
 LTS > 500 MΩ  
 RCD 3  
 45 7, 20 A  
 8 13

Date of Connection: 19 / 6 / 2019

I certify that the installation, or part of the installation, to which the Electrical Safety Certificate applies is connected to a power supply and is safe to use.

Certifier's name: MAM SINCLAIR  
 Registration/Practising licence number: E 11983

Certifier's signature:

Certificate Issue Date: 19 / 6 / 2019

Email: 500power@oponi@gmail.com  
 Organisation/Company:

2006-1192

### GASFITTING CERTIFICATE OF COMPLIANCE



Client Name: Goefrey England

Reference or Job #: [ ] ICP (if known): [ ]

Address of work: 25 Taumatawiri Street Oponani Po Box 171

Suburb: [ ] Town / City: [ ]

Description of gasfitting work: (If different gasfitting work was done by different people, state who did what gasfitting.)

*Install Renna 24A and reg/Pigtail set For 2x45 Kg pipe work*

Gas supply pressure 2.75 kPa Risk classification (tick one)  Low-Risk  General  High-risk

Gas type (tick one)  Natural gas  LPG  Biogas  Other (specify) [ ]

The work has been done in accordance with a certified design:  Yes  No

If yes – identify the certified design including name, date and version. Also attach a copy of the certified design to this certificate. (Or provide reference to readily accessible electronic format, eg Internet link.)

Identify: Link: [ ]

The work relies on manufacturer's instructions:  Yes  No

If yes – identify the instruction manual including name, date and version. Also attach a copy of manufacturer's instructions to this certificate. (Or provide reference to readily accessible electronic format, eg Internet link.)

Identify: Link: [ ]

The work has been done in accordance with means of compliance (specify):

Yes – AS/NZS 5601.1 sections 3 to 6  Yes – AS/NZS 5601.2 sections 3 to 9  No

Were any other standards or gas code of practice required for compliance?

Yes (specify) [ ]  No

Parts of the gas installation that are safe to connect to a gas supply?

All  Parts (specify) [ ]

Date(s) on which the work was done (if different from date of certifying gasfitting): [ ]

Name and registration number of anyone who carried out work under supervision: [ ]

By signing this document i confirm that I am satisfied that the work described in this certificate of compliance has been done lawfully and safely, and that the information on this certificate is correct.

Certifier name: MARK HENSON

Registration number: 30451 Certificate Issue Date: 16/4/19

Signature: (Signature)

Outline any additional information attached: [ ]

## GASFITTING CERTIFICATE OF COMPLIANCE



Client Name:

Reference or Job #:  ICP (if known):

Address of work:

Suburb:  Town / City:

Description of gasfitting work: (If different gasfitting work was done by different people, state who did what gasfitting.)

*Install Bernia A 24, pipe work, regulator and pig Tail Set for 2x 45 Kg bottles*

Gas supply pressure  kPa Risk classification (tick one)  Low-Risk  General  High-risk

Gas type (tick one)  Natural gas  LPG  Biogas  Other (specify)

The work has been done in accordance with a certified design:  Yes  No

If yes – identify the certified design including name, date and version. Also attach a copy of the certified design to this certificate.  
(Or provide reference to readily accessible electronic format, eg internet link.)

Identify:  
Link:

The work relies on manufacturer's instructions:  Yes  No

If yes – identify the instruction manual including name, date and version. Also attach a copy of manufacturer's instructions to this certificate.  
(Or provide reference to readily accessible electronic format, eg internet link.)

Identify:  
Link:

The work has been done in accordance with means of compliance (specify):

Yes – AS/NZS 5601.1 sections 3 to 6  Yes – AS/NZS 5601.2 sections 3 to 9  No

Were any other standards or gas code of practice required for compliance?

Yes (specify)   No

Parts of the gas installation that are safe to connect to a gas supply?

All  Parts (specify)

Date(s) on which the work was done (if different from date of certifying gasfitting):

Name and registration number of anyone who carried out work under supervision:

By signing this document I confirm that I am satisfied that the work described in this certificate of compliance has been done lawfully and safely, and that the information on this certificate is correct.

Certifier name:

Registration number:  Certificate Issue Date:

Signature:

Outline any additional information attached: