

APPLICATION



001



For Council Use
Received:

FORM 6

Application for Code Compliance Certificate

Section 92, Building Act 2004

The Building Consent

Building consent number: BC-2016-114/0
Issued by: Far North District Council

The Owner (delete this section if details have not changed from the building consent)

Property Address: 10 Marmon Street, Rawene, 0443
Name of Owner: Garry John Clarke and Elizabeth Dagmar Clarke and
Contact Person: Garry Clarke
Mailing Address: 10 Marmon Street, Rawene, 0443
Street Address / Registered Office:

Phone numbers: Landline 09 4057688
Mobile: 0210333999
Daytime: A/hours:
Fax:
Email Address: clarkegroup@ihug.co.nz

The following evidence of ownership is attached to this application:

If the Owner is a Company, Trust or other Organisation the Title or Capacity of the authorised signatory must be given.

Certificate of Title 6 months old or less Agreement for Sale and Purchase Lease Other document (s)

Already supplied with application

To Home HEATING Customers...

Please ensure the following is complete before the final Council Inspection

✓ Fill in the areas highlighted in yellow on page 2

✓ Make sure the installer has filled in Section "Other" on page 3

Agent (delete this section if the application is not being made on behalf of the owner)

Name of the agent:

(Only required if application is being made on behalf of the owner)

Contact person:

Mailing address / registered office:

Phone numbers:

Landline

Mobile:

Daytime:

A/hours:

Email / Web Address:

Relationship to the Owner:

(State details of the authorisation from the Owner to make the application on the owner's behalf)

First point of contact for communications with the council / building consent authority:

(State full name, mailing address, phone number /s Fax no., email address)

Phone numbers:

Landline

Mobile:

Daytime:

A/hours:

Email / Web Address:

Application

All building work to be carried out under the above building consent was completed on 18 Feb 2016 (date).

I request that you issue a Code Compliance Certificate for this work under section 95 of the Building Act 2004.

I hereby certify that, to the best of my knowledge, the information given in this application is true, complete and correct. I undertake to pay all actual and reasonable application costs incurred by the Far North District Council.

The Code Compliance Certificate should be sent to:

State name:

Garry Clarke

State address:

10 Marmon Street, Rawene, 0443

Signature of owner:

or

Signature of Agent on behalf of and with the authority of the owner:

Date:

// not possible - using P.O. Box.
R

The Person / Organisation responsible for invoice payments for this consent:

Owner / Applicant

Agent

Other

Key Contacts / Licensed Building Practitioners (LBP) – please provide if applicable

Designer or Architect		Builder / Carpentry Work	
Business / Name:		Business / Name:	
Address:		Address:	
Daytime:	After hours:	Daytime:	After hours:
Mobile:	Fax:	Mobile:	Fax:
Registration or LBP Registration No:		Registration or LBP Registration No:	
Drainlayer		Plumber	
Business / Name:		Business / Name:	
Address:		Address:	
Daytime:	After hours:	Daytime:	After hours:
Mobile:	Fax:	Mobile:	Fax:
Registration or LBP Registration No:		Registration or LBP Registration No:	
Structural Engineer		Electrician	
Business / Name:		Business / Name:	
Address:		Address:	
Daytime:	After hours:	Daytime:	After hours:
Mobile:	Fax:	Mobile:	Fax:
Registration or LBP Registration No:		Registration or LBP Registration No:	
Gas Fitter		Bricklayer	
Business / Name:		Business / Name:	
Address:		Address:	
Daytime:	After hours:	Daytime:	After hours:
Mobile:	Fax:	Mobile:	Fax:
Registration or LBP Registration No:		Registration or LBP Registration No:	
Foundation work		Blocklaying	
Business / Name:		Business / Name:	
Address:		Address:	
Daytime:	After hours:	Daytime:	After hours:
Mobile:	Fax:	Mobile:	Fax:
Registration or LBP Registration No:		Registration or LBP Registration No:	
External Plastering		Roofing work	
Business / Name:		Business / Name:	
Address:		Address:	
Daytime:	After hours:	Daytime:	After hours:
Mobile:	Fax:	Mobile:	Fax:
Registration or LBP Registration No:		Registration or LBP Registration No:	
Head Contractor / Site Manager		Other NZHAA	
Business / Name:		Business / Name: Keri Gas & Heat	
Address:		Address: 22 Mawson Ave	
Daytime:	After hours:	Daytime: kerikeri	After hours:
Mobile:	Fax:	Mobile: 021 186 4621	Fax:
Registration or LBP Registration No:		Registration or LBP Registration No: 1681	

Submit your application

To submit your application:

o **Post your completed application form to –**

The Building Consents Manager
Far North District Council
Private Bag 752
Kaikohe 0440

o **Drop your completed application form in at one of our Service Centres –**

Kaikohe Service Centre
Memorial Avenue
KAIKOHE

Kaero Service Centre
Main Road
KAEO

Kawakawa Service Centre
Gillies Avenue
KAWAKAWA

Kaitaia Service Centre
cnr Church & South Roads
KAITAIA

Kerikeri Service Centre
John Butler Centre
KERIKERI



For Council use

Received: ENVIRONMENTAL MANAGEMENT

Application no: 27 JUL 2015

RFS#: 2016-114

Home Kerikeri Ref: 177

FORM 2

Application for Solid Fuel Appliances Section 45, Building Act 2004

Free Standing Fireplace

Solid Fuel Stove

Inbuilt Fire Place

Wetback Installation

If you wish to book a lodgement and application vetting meeting, please book this in advance of lodgement by phoning our friendly Customer Service or Building Support Officer on 0800 920 029.

The Building

Street address of building:

(For structures which do not have a street address, number, state the nearest street intersection and the distance and direction from that intersection, or the closest RAPID no):

10 Marmon Street, Rawene, 0443

Legal description of land and where building is located:

(if the land is proposed to be subdivided, include details relevant lot number and subdivision consent)

Lot 1 DP 432156

Building name: *(if applicable)*

Location of building within site/block number:
(Includes nearest street access)

Number of Levels:

(Include ground level and any levels below ground)

Level / unit number:

Area:

(Total floor area: indicate area affected by the building work if less than the total area & SITE AREA)

154 m²

Current, lawfully established, use:

(Include number of occupants per level and per use if more than 1)

Dwelling

Year first constructed:

The Owner

✓
MS

✓

MS

Name of owner
(E.g. Mr, Mrs, Miss, Dr if an individual)
Contact person:

Garry John Clarke and Elizabeth Dagmar Clarke and CR Trustee
Garry Clarke

Mailing address:

10 Marmon Street, Rawene, 0443

Street address / registered office:

Phone numbers: Landline
Mobile
Daytime
Fax
Email Address

09 4057688
0210333999
After hour's
clarkegroup@ihug.co.nz

The following evidence of ownership is attached to this application:

If the Owner is a Company, Trust or other Organisation the Title or Capacity of the authorised signatory must be given.

Certificate of Title 6 months old or less Agreement for Sale and Purchase. Lease Other document(s)

Agent (delete if inapplicable)

Name of the agent:

Home Kerikeri Limited

Contact person:

Paul Graham

Mailing address / registered office:

PO Box 119

Kerikeri 0245

Phone numbers:

Landline 09 407 9666 Mobile 021 599 645

Daytime 09 407 9666 A/hours 021 599 645

Email / Web address: paul@homekerikeri.co.nz

Relationship to the Owner:

(State details of the authorisation from the Owner to make the application on the owner's behalf)

Supplier

Owner supplied evidence of Ownership

First point of contact for communications with the council / building consent authority:

(State full name, mailing address, phone number /s Fax no., email address)

Paul Graham

Phone numbers:

Landline 09 407 9666 Mobile 021 599 645

Daytime 09 407 9666 A/hours 021 599 645

Email / Web address: paul@homekerikeri.co.nz

Application

I request that you issue a building consent for the building work described in this application.


I hereby certify that, to the best of my knowledge, the information given in this application is true, complete and correct. I undertake to pay all actual and reasonable application costs incurred by the Far North District Council.

Signature of owner:

na

Handwritten signature

or
Agent on behalf of and with the authority of the owner:



Date:

The Person / Organisation responsible for invoice payments for this consent:

Owner / Applicant Agent Other _____

The Project

Description of the building work:

Installation of Masport R1500 and flue Kit

Will the building work result in a change of use of the building? Yes No

If Yes, provide details of new use: _____

Intended life of the building if less than 50 years: _____ years

List building consents previously issued (if any): _____ na

Estimated value of 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)

\$ _____ \$3,300.00

Building Consent

The building work will comply with the building code as follows:

Clause (List relevant clause number of the building code)	Means of Compliance (circle the relevant compliance document(s) or detail of alternative solution in the plans and specifications)	Waiver / modifications required (state nature of waiver or modification of building code)
B1 Structure	B1/AS2 NZS3604 NZS4203 NZS4229	
B2 Durability	B2/AS1 NZS3101 NZS3602 NZS3604	
C1-C2-C3-C4 Fire	C1/AS1 C2/AS1 C3/AS1 C4/AS1	
E2 External Moisture	E2/AS1 Specific Design	
F7 Warning systems	F7/AS1 NZS4512 NZS4515 AS/NZS 1668	
G10 Piped services	G10/AS1 AS/NZS3500.2 AS/NZS 3500.5	
G11 Gas and energy source	G11/AS1	
G12 Water supplies	G12/AS1	

Attachments

The following documents are attached to this application:

Plans and specifications



All plans and specifications must meet the minimum requirements set out in the Regulations or required by the building consent authority as set out below

Application checklist

Please ensure that your application contains **TWO sets** of the following information applicable to the proposed building work.

Plans (A4 or A3) and specifications (A4) must reach the FNDC minimum standard of documentation requirement. (Stated below)

- o Plans to be of a high professional standard preferably CAD (no colour drawings)
- o Each plan must contain drawing number, title, designers name, owners name, address, date and version controlled
- o Specifications must be relevant
- o Producer statements must be site specific and signed by persons of competence
- o Certificates of design must be signed and supplied by Practitioners (LBP) of competence

Floor plans for each level - scale: 1: 50 include:

- location of smoke detectors
- location of solid fuel heating appliance

Construction details - scale 1: 5 include:

- flashing details / penetrations
- o interface between elements / materials
- o fire separation / penetration

Truss / rafter plan - scale: 1: 100 - include:

- o location of members
- o fixing and framing details of flue penetration
- o lintels and framing

Site specific specifications – identify:

- technical work sections
- Schedule of materials and manufacturers specs.
- method of compliance

Plumbing and drainage layout - include:

- o identify fixtures, waste and vent pipe sizes
- ~~o fixings, materials, potable water identified~~

This application has been vetted and checked for completeness, the application contains the plans and specifications necessary for acceptance and further technical assessment.

Residential 1

The vetting date for receipt is 30/7/15

Signed JM Burger

Submit your application

- o **Post your completed application form to –**
The Building Manager
Far North District Council
Private Bag 752
Kaikohe 0440
- o **Make an appointment –**
To avoid delays and to have your application checked for completeness, call 0800 920 029 to make an appointment with a Vetting Officer at either the Kerikeri or Kaitaia Service Centre.
- o **Drop your completed application form in at one of our Service Centres –**

Kaikohe Service Centre Memorial Avenue <u>KAIKOHE</u>	Kaeo Service Centre Main Road <u>KAEO</u>
Kawakawa Service Centre Gillies Avenue <u>KAWAKAWA</u>	Kaitaia Service Centre cnr Church & South Roads <u>KAITAIA</u>
Kerikeri Service Centre John Butler Centre <u>KERIKERI</u>	

Private Bag 752, Memorial Ave, Kaikohe 0440, New Zealand, Freephone: 0800 920 029,
Phone: (09) 401 5200, Fax: 401 2137, Email: ask.us@fndc.govt.nz, Website: www.find.govt.nz

Garry John Clarke and Elizabeth Dagmar
Clarke and
CR Trustees Limited
PO Box 123
Rawene 0443

Rate Account Number: RTZ 5011809-0	
Valuation Number:	00611-08300
Location:	10 Marmon Street, Rawene 0443
Legal Description:	Lot 1 DP 432156

Call us on
09 401 5200
OR
0800 920 029

Or visit our
website
www.fndc.govt.nz



**Is your income low?
Do you live at the property?**
You could get up to \$605.00 off your rates!
Enquire about our Rates Rebate

Having trouble meeting your payments?
Enquire about our "Rates Easy Pay" programme,
designed to take the stress out of paying

**Did you know Far North District Council collect on
behalf of Northland Regional Council?**

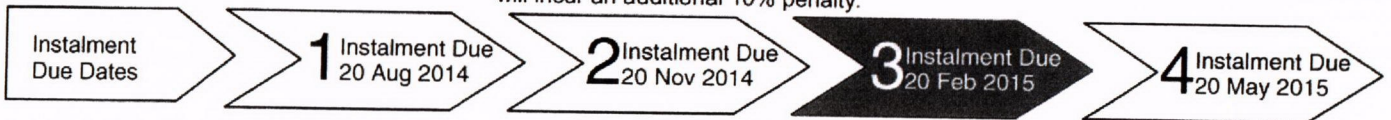
Contact us today

Rates Tax Invoice/Credit Note			
GST No: 52-004-926			
All rates are GST inclusive except for penalties charged			
Invoice Date: 20 Jan 2015			
TOTAL DUE NOW	\$	632.18	
Due Date		20 Feb 2015	
Annual Rates	Includes GST of \$353.36	\$	2,709.13
ACCOUNT BREAKDOWN		Combined Total FNDC/NRC	
Opening Balance	\$	0.00	
Previous Years Rates (including penalties)	\$	1,354.48	
Previous instalments this year	\$	0.00	
Penalties incurred this year	\$	0.00	
Remissions	\$	0.00	
Adjustments	\$	0.00	
Payments* (including rebates)	\$	1,399.54 ^{CR}	
Current Instalment (Includes GST of \$88.34)	\$	677.24	
TOTAL DUE NOW	\$	632.18	
Amount to clear your total rates to 30 Jun 2015	\$	1,309.59	
*Recent payments may not be included in this invoice			



M7-PS1287 S013267

A 10% PENALTY will be added to any portion of THIS INSTALMENT that remains unpaid after the DUE DATE
Any rates outstanding for any previous rating year that remains unpaid on 1 September 2014 and 1 March 2015
will incur an additional 10% penalty.



You have a direct debit arrangement with Council to pay your rates.
Unless we receive instructions to the contrary, your bank account will
be debited in accordance with the schedule shown alongside.

If you wish to cancel a direct debit, please give us at least two days
written notice prior to the direct debit payment date.

Direct Debit Payment Schedule			
Date	Amount	Date	Amount
26-Jan-15	\$52.38	9-Mar-15	\$52.38
2-Feb-15	\$52.38	16-Mar-15	\$52.38
9-Feb-15	\$52.38	23-Mar-15	\$52.38
16-Feb-15	\$52.38	30-Mar-15	\$52.38
23-Feb-15	\$52.38	6-Apr-15	\$52.38
2-Mar-15	\$52.38	13-Apr-15	\$52.38

Fire places / Heaters

Date	3/08/2015	Consent No	BC-2016-114
Residential	1	Building Officer	Graham Payton

Please note National Multi Use and the Approved / Simple design solutions are only processed for district plan requirements foundations, OSD and correctness to the DBH approval.

Decision column Key: Approved - *Complies with requirements of building code*
 RFI Required - *does not comply and requires further explanation*
 Not applicable – *Section is not applicable for this consent*
 Approved After RFI – *further information requested and now complies with requirements of building code*
 ✓ - *I have considered the prompt and answer explains*
 ≠ - *Prompt is NOT APPLICABLE to this project*

Note – *If RFI's are required you are required to compile the request on this form and also note the date of the response and how compliance has been demonstrated.* [Link to BCA Manual](#)

Description of Project (check the BCA Manual for category descriptions)		
Install new free standing Masport R1500 Woodstacker fireplace and flue kit.		
This is with my scope of competence	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>

	Cons'd	Check building application form 2 for the following	Peer Reviewed <input type="checkbox"/>
Approved	✓	Project value checked - Square meter rate	\$3,300.00 to install free standing fireplace and flue kit. Hand drawn floor plan shows position of free standing wood burner and smoke alarms - Cross-section through roof and manufacturers installation specifications appear to be complete. DOW is fit for purpose and correct.
	✓	Quality of Documents - A3 plans A4 specs	
	✓	Description of work - Fit for purpose and correct	
	✓	Specific Design – Manufacturer's specs/designs	
	✓	Specifications – site/project specific	
	≠	Is a CPU required? – Public use of the area – specified systems?	
Approved	Cons'd	PIM Issues F1	PIM not required on wood burner application. Means of escape (section 112) unchanged as this is an existing dwelling. No section 72 or 75 issues
	≠	Has the Pim been issued and are there any considerations needed in the building processing	
	✓	Section 72 (hazards)	
	✓	Section 75 (2 lots)	
	✓	Is the application affected by sections: <ul style="list-style-type: none"> • 112, • 113, • 114 to 116B • 117 to 120 (including Schedule 2) of the BA 2004	
	≠	Wind and corrosion zones - Determine fixings	
≠	Heritage site/building considerations		
	RFI REQUIRED	RFI RESPONSE	
	Click here to enter text.	Click here to enter text.	

	Cons'd	Fire Places – inbuilt/free standing or other heating – <u>-C/AS1/VM1, B1, B2, E1, E2, NZS Log in Page, MFE Approved Burners, MBIE Information, AS NZS 2918</u>	Peer Reviewed <input type="checkbox"/>
	Approved	✓	Manufactures details specifications, appliance and flues etc
✓		Location (seismic restraint clearances) Penetrations in weather shield	
✓		M.O.E. requirements met for wood burners	
✓		Type of Appliance – inbuilt/free standing/out door/central heating/other	
✓		Type of fuel – Gas/wood/Pellet/other	
✓		FNDC/NRC requirements met	
✓		Location plan provided – floor plan	
≠		In built unit – (chimney condition)	
≠		Open fires – hearth clearances	
≠		Chimney design – (B1/AS 3)	
≠		Penetrations detailed – roof/cladding	
≠		Chimney – flashing details	
≠		Chimney Framing – wood treatment H3.1 etc	
≠		Chimney – additional wall bracing required	
✓		Chimney restraint shown / identified	
✓		Seismic restraints detailed	
✓		Flue clearances - combustible materials	
		Wet backs:	
≠	Low pressure HWC – details/PS 3 required?		
≠	Pipe and fixtures specifications		
≠	Producer Statements, Installation, Commissioning or Energy certificates required – list below		
	RFI REQUIRED Click here to enter text.		RFI RESPONSE Click here to enter text.

	Cons'd	General considerations <u>NZS Log in Page</u>	Peer Reviewed <input type="checkbox"/>
	Approved	✓	Smoke detectors in or within 3.0m bedrooms , all exits
≠		Means of Escape 24m dead end and 60m open	
≠		Vertical fire separation SH and SR purpose groups	
✓		Light and visual awareness	
✓		Ventilation	
	RFI REQUIRED Click here to enter text.		RFI RESPONSE Click here to enter text.

Not Applicable	Cons'd	All Producer Statements supplied to support this application PS1/PS2 Producer statement guide: IPENZ and CM Guide	Peer Reviewed <input type="checkbox"/>
	≠	Design specific to project	No wetback - Producer statement not required.
	≠	Design within the authors competence	
	≠	Which Building code clauses	
	≠	Compliance document / Alternative solution used Note: If this is an alternative solution of consequence	
	≠	Building work covered by this statement all / part only Stamped plans and or Calculations provided	
	≠	Level of supervision required by Engineer PS4 CM1-5and or PS3 from contractor	
	≠	Insurance cover appropriate on statement	
RFI REQUIRED Click here to enter text.		RFI RESPONSE Click here to enter text.	

Important Imperative Information to be added to Building Consent (list as required)

PS3, PS4, survey certification, notes for the inspector/ builder (If new building CCC applicable or older building Condition assessment report provided (Note any recommendations or quality of report)

List required Producer Statements and the like required for CCC:


Click here to enter text.

Conditions Required on Building Consent		Peer Reviewed <input type="checkbox"/>
<input type="checkbox"/>	Section 67 Waivers and Mods	Enter text.
<input type="checkbox"/>	Section 72 Natural Hazards	Enter text.
<input type="checkbox"/>	Section 75 Two or more allotments	Enter text.
<input checked="" type="checkbox"/>	Section 90 Inspection checklist filled in for project and completed	1
<input type="checkbox"/>	Section 113 Specified intended life Only for projects under the 50yrs	Enter text.

Req'd	Pair	2 inspect's	Types of Inspections Required		Peer Reviewed <input type="checkbox"/>	Qty
<input type="checkbox"/>		<input type="checkbox"/>	208	Foundations slab or wall concrete strip foundations	Boundaries are to be defined and foundations excavated, reinforcing placed as required. Depth/width of excavations, steel size, laps ties clearances ground bearing to be checked.	1
<input type="checkbox"/>		<input type="checkbox"/>	209	Footings pile or posts	Boundaries are to be clearly defined. Pile and/or post holes to be drilled/dug to required depth, cleaned and correct size. Depth/width of holes, ground bearing (ie firm original clay) anchor or bracing components identified, to be checked.	1
<input type="checkbox"/>		<input type="checkbox"/>	212	Slab drainage concrete floors	All sub floor drainage to be completed, and junctions exposed. Inspection to be carried out while under water test	1
<input type="checkbox"/>		<input type="checkbox"/>	213	Slab concrete floors	All slab steel, underlay, penetrations wrapped, thickenings and point loads, formwork complete. Please have a string line taught across slab for ready thickness check	1
<input type="checkbox"/>		<input type="checkbox"/>	214	Tilt Slabs	All Formwork complete. All steel in place, tied and on chairs. All welding plates lifting eyes as per engineer design.	1
<input type="checkbox"/>		<input type="checkbox"/>	217	Sub floor timber floor	Bearer support, fixings, and size, and joist span, support, fixings and size, and brace size, location, fixings to be complete (if this is carried out before the floor is laid it is useful). Decks – all fixings to be stainless steel.	1
<input type="checkbox"/>		<input type="checkbox"/>	221	Bond Beam	Any block work with bond beams or fill to be complete with steel correctly placed and if over 1200mm high washouts at the base of each starter	1
<input type="checkbox"/>		<input type="checkbox"/>	222	Framing	All framing to be completed, all bottom plate, stud to top plate, truss fixings, strapping diagonal braces, purlin fixings to be checked prior to building wrap or roof install	1
<input type="checkbox"/>		<input type="checkbox"/>	223	Flashing/Wrap	All building wrap and flashing tape to be completed, roof can be installed by this stage	1
<input type="checkbox"/>		<input type="checkbox"/>	224	Cavity	Check of Flashings and Battens to Cavity systems prior to cladding being installed / fitted	1
<input type="checkbox"/>		<input type="checkbox"/>	225	Brick Veneer	Bricks half completed, brick tie spacing, slope, type checked, cavity width window flashings (dpc) checked	1
<input type="checkbox"/>		<input type="checkbox"/>	226	Exterior Cladding		1
<input type="checkbox"/>		<input type="checkbox"/>	229	Preline	Cladding completed windows installed, building completely weather tight, pre-wire, pipe-out (see preline plumbing) wastes and soil stacks, vents and insulation complete.	1
<input type="checkbox"/>		<input type="checkbox"/>	230	Fireplace Chimney	Chimney to be inspected prior to the fire being installed (In Built)	1
<input type="checkbox"/>		<input type="checkbox"/>	233	Preline Plumbing often part of preline	All plumbing to be complete and mixers bypassed, outlets plugged and entire system to be under 1500kpa (250psi) pressure test for not less than 30 minutes, Pressure gauge to be on the line at time of inspection and under the above pressure	1
<input type="checkbox"/>		<input type="checkbox"/>	237	Post Line	When Internal linings (gib) is installed and all bracing elements correctly fastened, fastening type and spacing to be inspected. All fastening to be exposed, no stopping skirting, scotia etc to be covering fasteners	1
<input type="checkbox"/>		<input type="checkbox"/>	241	Drainage	An inspection of all foul water, storm water drains, septic tanks, effluent fields, sewer connections is to be carried out when drains are completed prior to back filling all foul water lines to be under static water test at time of inspection As built plan of drainage to be provided	1
<input type="checkbox"/>		<input type="checkbox"/>	245	Septic Tank	Septic Tank installed. Effluent systems completed and/or planted. Asbuilt plan of drainage required at time of inspection.	1
<input type="checkbox"/>		<input type="checkbox"/>	248	Swimming Pool Fence	The pool fence and gates must meet the requirements of the Swimming Pool and Fences Act 1987	1
<input checked="" type="checkbox"/>		<input type="checkbox"/>	305 Final	Final – Building (Code Compliance Certificate inspection)	All work to be completed, all specified inspections on inspection sheet passed by an FNDC building officer, and all work complying to consented plans. (This may require landscaping against building to be complete also). All required documentation to be provided, see below. Development levies to be paid prior to issue of CCC if applicable	1

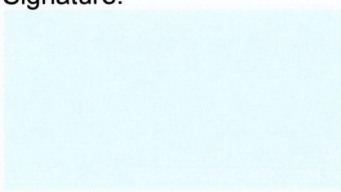
- Indicate which inspections are required in the far RHS box with a "tick"
- Inspections to be conducted at the same time – paired – should be indicated by letters AA, or BB etc for each pair.
- If **two inspectors** are required to conduct an inspection indicate with a "tick" in column 3
- If **more than one inspection** is required for a particular type – change the "Qty"(quantity) number in the left hand column.
- You can **delete** inspections from the list that are **NOT** required to assist administration.

Total number of Inspections: 1

Decision:			
Consent Granted	Name: Graham Payton	Signature: 	Date: 3/08/2015
I am satisfied on reasonable grounds that the proposed plans and specifications comply with building code requirements.			
Choose an item.	Name: Enter name	Signature: 	Date: Date
Click here to enter text.			

Save in Objective when finished

YOUR FOLDER

Peer Reviewers Notes		
Click here to enter text.		
Enter Name: Enter name	Signature: 	Date: Enter date.

RFI Section – Compile here your text for any RFI communication. (1 st Communication/letter)
Click here to enter text.

RFI Section – Compile here your text for any RFI communication. (2 nd Communication/letter)
Click here to enter text.