

FOR OFFICE USE ONLY

Consent No:

Date Received:

Application for a Certificate for Public Use

Section 363A, Building Act 2004

(Complete items that are applicable to your project)

THE BUILDING

PREMISES / PART OF PREMISES:

Description of premises / part of premises for which certificate is sought: *[Identify the building in which the premises of part of the premises are located and describe those premises or that part of the premises. Provide plans or diagrams that clearly delineate the premises of part of the premises]*

Tick relevant box - All of the premises Part of the premises

Street Address (or Rapid No if applicable):	Valuation/Assessment Number:
	Legal Description: Lot: DP:

BUILDING WORK AFFECTING PREMISES / PART OF PREMISES:

Building Consent number:	Building name:
This work relates to the following Building Consents issued by the: Grey District Council	

THE APPLICANT

(person who owns, occupies, or controls premises)

Applicant's Name:	Contact Person: <i>(if owner is not an individual)</i>
Mailing/Billing Address:	
Street Address/Registered Office:	
E-mail Address:	Phone Day:
Phone A'Hours:	Fax: Mobile:

The applicant is the person who owns/occupies or controls the premises

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

- | | |
|--|----------------------------------|
| <input type="checkbox"/> Certificate of Title | <input type="checkbox"/> Lease |
| <input type="checkbox"/> Sale & purchase agreement | <input type="checkbox"/> Licence |
| <input type="checkbox"/> Property management agreement | <input type="checkbox"/> Other |

Owner's name: <i>[Delete if applicant is the owner]</i>
Owner's address: <i>[Delete if applicant is the owner]</i>

THE AGENT

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 Name:	Contact Person: <i>(if Agent is not an individual)</i>
Mailing/Billing Address:	
Street Address/Registered Office:	
E-mail Address:	Phone Day:
Phone A'Hours:	Fax: Cellphone:

Relationship to Owner: *[state details of the authorization from the owner to make the application on the owner's behalf]*

APPLICATION

I confirm that no Code Compliance Certificate has been issued for the building work.

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]

Members of the public can safely use the premises/part of the premises described above safely because:

[State reasons for 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 (e.g. means of escape from fire) on site (provide information in attachments, if necessary)]

THE PERSONNEL WHO CARRY OUT THE BUILDING WORK ARE AS FOLLOWS:

The personnel who carry out the building work are as follows:

[If known, list names, addresses, phone numbers, and (where relevant) registration numbers]

Name of Builder:		Registration Number:
Mailing Address:		
E-mail Address:		Phone Day:
Name of Registered Plumber:		Registration Number:
Mailing Address:		
E-mail Address:		Phone Day:
Name of Registered Drainlayer:		Registration Number:
Mailing Address:		
E-mail Address:		Phone Day:
Name of Registered Gasfitter:		Registration Number:
Mailing Address:		
E-mail Address:		Phone Day:
Name of Designer:		Registration Number:
Mailing Address:		
E-mail Address:		Phone Day:
Name of Engineer:		Registration Number:
Mailing Address:		
E-mail Address:		Phone Day:
Name of Other:		Registration Number:
Mailing Address:		
E-mail Address:		Phone Day:

REQUEST:

I request that 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

Signature of owner / agent on behalf of
and with the authority of the owner:

Name of person signing:

Date:

REQUIRED ATTACHMENTS

- Evidence of applicant's status
- Plans showing all, or part of the premises described above
- Certificates from personnel who carried out the building work
- Energy work certificates
- IQP testing and certification of specified systems being operational
- A management plan for the safety of people during ongoing work

Application Fee (Deposit): \$ _____ (this will be determined when the application is lodged)

SAFETY ISSUES TO BE CONSIDERED

	Building Code Clause	Suggested Information	Notes	Information provided. (i.e. Producer Statement)
Structure	B1	Producer Statement – Construction from Structural Engineer, or council inspection for non-specific design.		
Fire safety	C1–C4, F6, F7	Producer Statement – Construction from Fire Engineer, or council inspection for non-specific design.		
Access routes	D1	Council inspection	Slip resistance, handrails.	
Hazardous substances	F3	HSNO Certification		
Safety from falling	F4	Council inspection	Balustrades to be installed	
Signs	F8	Council inspections		
Food preparation	G3	Council inspection		
Ventilation	G4	Producer Statement – Construction from Mechanical Engineer or council inspection for natural ventilation		
Electricity	G9	Electricians Energy Certificate		
Gas	G11	Gasfitters Energy Certificate		