Waikato Building Consent Group

Pre-line Building Inspection

Applicant's Name:	Consent No:	
Property Address:	Lot No.:	Wind Zone:

Restricted Building Work - LBP license check *(Check against list of notified LBPs for this project)* ☐ Not applicable, not RBW

Name of LBP: *(If not on site, ask who the LBP is)*	LBP Onsite: ☐ Yes ☐ No License sighted: ☐ Yes ☐ No License No: ..... *(if sighted)* Expiry Date: .....

ITEMS TO BE CHECKED *[Checked against the approved Building Consent (BC) documents]*

Key:
Decision: [√] or [P] = Pass [X] or [F] = Fail, further inspection required [I] or [—] or [NA] = Not Applicable
Reason for decision: Compliance or non compliance with the approved building consent documents

? Approved BC documents and amendments on site
? Prior inspection passed or instructions addressed

Exterior

? Roof cladding / flashings
? Wall cladding / flashings (on cladding checklist)
? Cladding cavity: drained / vented (on cladding checklist)
? Window flashings (on cladding checklist)
? Window glazing / safety glazing (on cladding checklist)

Interior

? Moisture content = ...
? Ceiling battens: size, spacing
? Insulation walls / ceiling
? Insulation certificate ◯ Received ◯ Outstanding ◯ NA
? Roofing / wall underlay
? Holes and notches in framing / mid-floor (both to check)
? Bottom plate / brace fixing
? Ceiling / Floor nailed off if diaphragm
? Joinery provides Light / ventilation
? Windowless room has adequate ventilation
? Mechanical ventilation vented to exterior
? Scullery / laundry cupboard with no window
? Safety glass
? Air seals
? Ceiling diaphragm
? Stairs as per details
? Fire design requirements / Firewall penetration
? STC sound rating requirements

Decks

? Deck level / fall / floor level / wall to stringer gap
? Deck finish / membrane
? Barrier heights / handrails / stairs
? Deck / parapet flashings
? Outlets and overflows, drip edge

Comments if required: ☐ Photos attached *(if relevant)* ☐ Memo / Instruction No: ..... ☐ Verbal instruction *(specify):*

OUTCOME OF DECISIONS *[Tick the correct outcome: e.g. ☑ PASS or ☑ FAIL etc. Use REPEAT section if applicable.]*

Work complies with the approved BC documents
☐ PASS
☐ FAIL. But work may proceed to next inspection.
☐ FAIL. Repeat inspection required ☐ Additional fee
Officer Name:
Signature : Date:

REPEAT: Work complies with the approved BC documents
☐ PASS
☐ FAIL. But work may proceed to next inspection.
☐ FAIL. Repeat inspection required ☐ Additional fee
Officer Name:
Signature: Date: