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| Applicant's Name: | Consent No: |
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| Property Address: | Lot No: |
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ITEMS TO BE CHECKED [Checked against the approved Building Consent (BC) documents]

Key: Decision: or = Pass or = Fail, further inspection required or or = Not Applicable
Reason for decision: Compliance or non compliance with the approved building consent documents

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| <input type="checkbox"/> Approved BC documents & amendments on site Service Disconnections <input type="checkbox"/> Water disconnected Plumber's name: Reg. No.: <input type="checkbox"/> Stormwater sealed off Drainlayer's name: Reg. No.: <input type="checkbox"/> Sewer sealed off Drainlayer's name: Reg. No.: <input type="checkbox"/> Septic tank removed or emptied and filled in / collapsed Drainlayer's name: Reg. No.: | <input type="checkbox"/> Power disconnected Electrician's name: Reg. No.: <input type="checkbox"/> Gas disconnected Gas fitter's name: Reg. No.: As laid services plan: <input type="checkbox"/> Received <input type="checkbox"/> Outstanding <input type="checkbox"/> NA Other <input type="checkbox"/> Site cleared BWOFF / CS : <input type="checkbox"/> Removed <input type="checkbox"/> Amended <input type="checkbox"/> NA <input type="checkbox"/> Update earthquake register |
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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.]

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| Work complies with the approved BC documents <input type="checkbox"/> PASS <input type="checkbox"/> FAIL. But work may proceed to next inspection. <input type="checkbox"/> FAIL. Repeat inspection required <input type="checkbox"/> Additional fee Officer Name: Signature : Date: | REPEAT: Work complies with the approved BC documents <input type="checkbox"/> PASS <input type="checkbox"/> FAIL. But work may proceed to next inspection. <input type="checkbox"/> FAIL. Repeat inspection required <input type="checkbox"/> Additional fee Officer Name: Signature: Date: |
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