Waikato Building Consent Group — Demolition / Removal Inspection

Applicant's Name:	Consent No:
Property Address:	Lot No:

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 & amendments on site

Service Disconnections

☐ Water disconnected
Plumber's name: ……
Reg. No.: ……

☐ Stormwater sealed off
Drainlayer's name: ……
Reg. No.: ……

☐ Sewer sealed off
Drainlayer's name: ……
Reg. No.: ……

☐ Septic tank removed or emptied and filled in / collapsed
Drainlayer's name: ……
Reg. No.: ……

☐ Power disconnected
Electrician's name: ……
Reg. No.: ……

☐ Gas disconnected
Gas fitter's name: ……
Reg. No.: ……

As laid services plan: ◯ Received ◯ Outstanding ◯ NA

Other

☐ Site cleared

BWOF / CS : ◯ Removed ◯ Amended ◯ NA

☐ Update earthquake register

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. 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. Work may proceed to next inspection.
☐ FAIL. Repeat inspection required ☐ Additional fee
Officer Name:
Signature: Date: