Waikato Building Consent Group

Blocks, Beams, Columns & Tilt Slab 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

Bond beams, Beams, Columns, Block Work

? All steel as per detail: size, type, placement, laps, ties, cover
? Bond beams / lintels, No. of bars, stirrups
? Wash out ports are clean
? Construction joint placement
? Tanking / drainage
? Subfloor ventilation

Tilt Slabs

? All steel as per detail: size, type, spacing, laps, ties, cover
? Thickness of slab correct

Required Documentation

? Engineer inspection completed
PS4: ◯ Received ◯ Outstanding ◯ NA

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: