



WAIROA DISTRICT COUNCIL

REGULATORY DEPARTMENT

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Coronation Square, Queen Street, Wairoa

APPLICATION FOR AMENDMENT TO COMPLIANCE SCHEDULE In accordance with Section 106, Building act 2004

CS: _____

Section One - The Building

Street address/rapid number
of building: _____

Legal description of land where building is located: *(State legal description as at the date of application and, if subdivision is proposed include details of relevant lot numbers and subdivision consent)*

Lot: _____ DP: _____ Sec. No: _____

BLK No: _____ Val No: _____

Number of levels: *(include ground level and any levels below ground)*

Year first constructed: *(approximate date is acceptable)*

Current, lawfully established, use: *(include number of occupants per level and per use if more than one level)*

Location of building within site: *(include nearest street access)*

Maximum number of occupants: _____ Intended life of building: _____

Related building consent number: _____ Highest fire category: _____

Purpose group: _____

Section Two - Owner

Name of owner: *(include title, e.g. Mr, Miss, Dr if an individual, and the contact person's name if a company, trust or similar)*

Mailing address: _____

Street address/registered office: _____

Daytime phone number: _____ Mobile: _____

Email address: _____

Section Three - Agent (only required if application is being made on behalf of the owner)

Name of agent: *(include title, e.g. Mr, Miss, Dr if an individual, and the contact person's name if a company, trust or similar)*

Mailing address: _____

Street address/registered office: _____

Daytime phone number: _____ Mobile: _____

Facsimile number: _____ Email address: _____

Relationship with owner: *(state details of authorisation from owner to make the application of the owner's behalf)*

Section Four - General

Applicants are liable for all fees and charges during the processing of an Amendment of a Schedule.

Debtor: *(the person responsible for the account)*

Owner Agent Other

Mailing address:

Daytime phone number:

Mobile:

First point of contact: *(for communication with Council)*

Owner Agent Other

Mailing address:

Daytime phone number:

Mobile:

Section Five - Application *I request that the compliance schedule for the above building be amended as follows:*

Specified system requiring amendment:

Amendment required:

Reason: *(why amendment is required to ensure that the specified system meets the performance standard)*

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

Date

Attachments *(the following documents are attached to this application)*

Office use

Copy of existing Compliance Schedule provided

Proof of Ownership documents

Copy of Certificate of Title

Copy of Lease Agreement

Agreement for Sale and Purchase

Other document showing full name of legal owner

For Council Office Use Only

Order/Officer	Officers name	Date received
<input type="checkbox"/> Received by		
<input type="checkbox"/> Lodged by		
<input type="checkbox"/> Processed by		

All relevant documentation received with application:

Yes No