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APPLICATION FOR CERTIFICATE OF ACCEPTANCE

Under Section 97, Building Act 2004

If you need help in filling out this form please contact our Customer Services staff on (03) 353-9007 or toll free 0800 EC INFO (0800 324 636). They will be able to provide some general assistance or refer you to an officer who can help you with your application.

FOR OFFICE USE ONLY				
Application number:				
Charges paid:				
Receipt number:				

DP No.

DETAILS OF THE BUILDING (DAM) (including Appurtenant

Legal description of land where building (dam) is located:

Location of building and/or dam within site/block number:

Street address of Building (dam) is located:

Name of Building (Dam): ___

[For structures that do not have a street address, state the nearest street intersection and the distance and direction from that intersection.]

Lot No._____

No. of levels:	Level unit number:	Area:	
Current, lawfully established, use:			
Year first constructed:			
OWNER AND AGENT RETAIL			
OWNER AND AGENT DETAILS			
1. Name and of Owner:			
Surname:	First names (in full):		Mr/Mrs/Ms/ Miss/Dr/Prof.
Surname:	First names (in full):		Mr/Mrs/Ms/ Miss/Dr/Prof.
OR			
Registered Company name and nur	nber:		
Mailing address:			
Street address/registered office:			
Phone number:	Landline:	Mobile:	
Facsimile number:	Daytime:	After hours:	
Email address:	Website:		
Contact person:			
The following evidence of ownersh	ip is attached to this application: [Tick r	elevant box]	
O Certificate of Title	Sale and Purchase Agreement	○ Lease	Other
Tick here if you are an ECan	n staff member, an ECan Councillor, or a fai	mily member of either.	



tax):

ECAN BCA F008-v2.0 Date: 14/05/14 Page 2 of 4 2. Name of Agent: [Only required if application is being made on behalf of the owner.] Name of agent: Mailing address: Street address/registered office : Landline: Phone number: Mobile: Facsimile number: Daytime: After hours: Email address: Website: Relationship to Owner: [State details of the authorisation from the owner to make the application on the owner's behalf.] First point of contact for communications with the council: [state full name, mailing address, phone numbers, email address] **BUILDING WORK** Description of building work: Date building work was carried out: The personnel who carried out the building work are as follows: Key personnel: Phone no: ____ Designer(s): Registration no: Phone no: Builder(s): Registration no: Registered Drainlayer(s): Phone no: ____ Registration no: Registered Plumber(s): Phone no: __ Registration no: Phone no: ____ Other: Registration no: ____ Did the building work result in a change of use of the building dam? Yes/No If yes, provide details of the new use: Intended life of building (dam) if 50 years or less: ____ years List building consent previously issued for this project (if any): [list who issued the consent, the date of issue and the consent number]

Estimated value of the building work on the building (dam) which building levy will be calculated (including goods and services



There are no specified systems in the building (dam).

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The f	ollowir	ng plans and specifications are attached to this application:			
Reas	ons wh	ny a certificate of acceptance is required: [tick appropriate circle]			
0	The owner, or the owner's predecessor in title, carried out building work for which a building consent was required, but a consent was not obtained because: [explain in detail]				
\circ		ding consent could not practicably be obtained in advance because the building work dam had to be carried out urgently: te one of the following			
		For the purpose of saving or protecting life or health or preventing serious damage to property as follows: [explain in detail]			
	0	In order to ensure that a specified system was maintained in a safe condition or made safe as follows: [explain in detail]			
0	relation	building consent authority that granted the building consent is unable or refuses to issue a code of compliance certificate in on to the building work, and no other building consent authority will agree to issue a code of compliance certificate for the ng work. [state details of name of building consent authority and building consent granted]			
		NCE SCHEDULE ed systems for the building (dam) are as follows: [specified systems are defined in regulations]			
		a cyclome for the banding (dain) are actioned. [opcomed cyclome are domined in regulations]			
The f	ollowir	ng specified systems were altered, added to, or removed in the course of the building work:			



BULLDING CONSENT

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ATTACHMENTS						
The following documents are attached to	o this application:					
Project information memorandum Plans and specification Certificates from personnel who carried out the building work Energy work certificate						
ADDITIONAL INFORMATION – D	OAM DETAILS					
Size of dam: Volume Capacity	v (m³)	Depth of dam (m)				
Name of dam: (if applicable)	Name of dam: (if applicable)					
ARRICATION						
APPLICATION I request that you issue a certificate of acceptance for the building work described in this application.						
Signature of owner / agent on behalf of and with the authority of the owner	Date	Full name of person signing – please print				
Council use:						

