

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

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

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