Waikato Building Consent Group	Demolition / Removal Inspection
Applicant's	Consent
Name: Property	No:
Address:	No:
ITEMS TO BE CHECKED [Checked against the approved Building Consent (BC) documents]  Key:	
Decision:	
☐ Approved BC documents & amendments on site	☐ Power disconnected
Service Disconnections	Electrician's name:
☐ Water disconnected Plumber's name:	Reg. No.:
Reg. No.:	Gas fitter's name:
Stormwater sealed off     Drainlayer's name:	Reg. No.:
Reg. No.:	As laid services plan: Received Outstanding NA
☐ Sewer sealed off Drainlayer's name:	Other  Site cleared
Reg. No.:	BWOF / CS: Removed Amended NA
☐ Septic tank removed or emptied and filled in / collapsed Drainlayer's name:	Update earthquake register
Reg. No.:	
Comments if required: Photos attached (if relevant) M	emo / 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	REPEAT: Work complies with the approved BC documents
<ul><li>□ PASS</li><li>□ FAIL. Work may proceed to next inspection.</li></ul>	<ul><li>□ PASS</li><li>□ FAIL. Work may proceed to next inspection.</li></ul>
☐ FAIL. Repeat inspection required ☐ Additional fee Officer Name:	☐ FAIL. Repeat inspection required ☐ Additional fee  Officer Name:
Signature : Date:	Signature: Date:















