

Waikato Building Consent Group

Excavation, Siting and Foundation Inspection

Applicant's Name:	Consent No:
Property Address:	Lot No.: Wind Zone:
Restricted Building Work - LBP license check <i>(Check against list of notified LBPs for this project)</i>	
Name of LBP: <i>(If not on site, ask who the foundation LBP is)</i>	LBP Onsite: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No License sighted: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No License No: <i>(if sighted)</i> Expiry Date:

ITEMS TO BE CHECKED *[Checked against the approved Building Consent (BC) documents]*

Key:
Decision: P = Pass F = Fail, further inspection required I or E or NA = Not Applicable
Reason for decision: Compliance or non compliance with the approved building consent documents

<input type="checkbox"/> Approved BC documents and amendments on site <input type="checkbox"/> Correct address and Lot No. <input type="checkbox"/> Consent conditions checked Siting <input type="checkbox"/> Siting as per approved plans, pegs checked <input type="checkbox"/> Retaining walls: Nova flow, PS if surcharge or >1.5m Ht Building height to boundary Surveyors report <input type="radio"/> Received <input type="radio"/> Outstanding <input type="radio"/> NA Excavations <input type="checkbox"/> Ground bearing acceptable <input type="checkbox"/> Specific foundation design <input type="checkbox"/> Engineer supervision <input type="checkbox"/> Hazards: floor heights & flood levels, ground stability <input type="checkbox"/> Council drains under building <input type="checkbox"/> Excavation: safe slope Foundations:- Piled / drilled / driven foundations <input type="checkbox"/> Pile heights correct for type of bracing element Pile depth correct for pile type <input type="checkbox"/> Pile spacing for bearers <input type="checkbox"/> Floor height to ground level, 450mm crawl space <input type="checkbox"/> Footing: width, depth, clean, level <input type="checkbox"/> Anchor piles / brace piles - Layout matches plans <input type="checkbox"/> Driven piles	<input type="checkbox"/> Discuss fixing protection: galvanised / stainless <input type="checkbox"/> No water ponding under floor Concrete / Raft slab foundations <input type="checkbox"/> Sand / hard fill compaction (certificate if fill >600mm) <input type="checkbox"/> Monolithic: slabs / footings, insulation as per plans <input type="checkbox"/> DPM Polythene: thickness, lapped & taped, no damage <input type="checkbox"/> Foundations: dimensions, depth, clean, square, level <input type="checkbox"/> Floor height to finished ground levels <input type="checkbox"/> Steel: type, size, spacing, coverage, clean, laps, ties <input type="checkbox"/> Reinforcing mesh / type / size / laps / supplementary rods <input type="checkbox"/> Slab thickness / floor thickenings <input type="checkbox"/> Lift mesh / chairs / saw cuts / free joints <input type="checkbox"/> Bottom plate connectors <input type="checkbox"/> Tanking / drainage for split level <input type="checkbox"/> Engineer designed foundations Required Documentation PS4 Sand-pad <input type="radio"/> Received <input type="radio"/> Outstanding <input type="radio"/> NA PS4 Foundations <input type="radio"/> Received <input type="radio"/> Outstanding <input type="radio"/> NA PS4 Underfloor insulation <input type="radio"/> Received <input type="radio"/> Outstanding <input type="radio"/> NA ROW Foundations <input type="radio"/> Received <input type="radio"/> Outstanding <input type="radio"/> NA Building <input type="checkbox"/> Discuss floor / ground levels & accessibility requirements <input type="checkbox"/> Hazards: floor / flood heights, ground stability
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Comments if required: Photos attached *(if relevant)* Memo / Instruction No: Verbal instruction *(specify)*

OUTCOME OF DECISIONS <i>[Tick the correct outcome: e.g. <input checked="" type="checkbox"/> PASS or <input checked="" type="checkbox"/> FAIL etc. Use REPEAT section if applicable.]</i>	
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:

