

Waikato Building Consent Group

Sub-Floor / Pre-Floor Inspection

Applicant's Name:	Consent No:	
Property Address:	Lot No.:	Wind Zone:

Restricted Building Work - LBP license check (Check against list of notified LBPs for this project) ☐ Not applicable, not RBW

Name of LBP: (If not on site, ask who the LBP is)	LBP Onsite: <input type="checkbox"/> Yes <input type="checkbox"/> No
	License sighted: <input type="checkbox"/> Yes <input type="checkbox"/> No
	License No: (if sighted)
	Expiry Date:

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

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

<p><input type="checkbox"/> Approved BC documents and amendments on site</p> <p><input type="checkbox"/> Prior inspection passed or instructions addressed</p> <p>Concrete</p> <p><input type="checkbox"/> Sand/hard fill compaction (certificate if fill >600mm)</p> <p><input type="checkbox"/> DPM Polythene / lapped / taped / no damage</p> <p><input type="checkbox"/> Reinforcing mesh / type / size / laps / supplementary rods</p> <p><input type="checkbox"/> Slab thickness / floor thickenings</p> <p><input type="checkbox"/> Lift mesh / chairs / saw cuts / free joints</p> <p><input type="checkbox"/> Bottom plate connectors</p> <p><input type="checkbox"/> Tanking / drainage for split level</p> <p><input type="checkbox"/> Underfloor insulation PS4 (if relevant)</p> <p><input type="checkbox"/> Edge insulation required and in place</p> <p>Timber</p> <p><input type="checkbox"/> Insulation as per calculations (timber floor)</p> <p><input type="checkbox"/> Piles / bearers, joist sizes, span, spacing, fixings (Gal / SS), Timber treatment</p> <p><input type="checkbox"/> Solid blocking to joist</p> <p><input type="checkbox"/> Polythene on ground / Damp course – for piles <300mm high</p> <p><input type="checkbox"/> Finished floor level – ground level, 450mm crawl space</p> <p><input type="checkbox"/> Subfloor ventilation</p> <p><input type="checkbox"/> Layout of subfloor bracing matches foundation plans</p>	<p>Plumbing</p> <p><input type="checkbox"/> Plumber's name.....</p> <p>Reg. No.:</p> <p><input type="checkbox"/> Check number / layout / size on all discharge pipes</p> <p><input type="checkbox"/> Fall for discharge pipes 1:40 for 65mm, 1:60mm for 100mm pipe</p> <p><input type="checkbox"/> Depth of drain versus connection or septic tank location</p> <p><input type="checkbox"/> Location of vents / vent size (AS3500 = 50mm, G13 = 80mm)</p> <p><input type="checkbox"/> Location HWC drain, relief pipe</p> <p><input type="checkbox"/> All waste pipe at foundations protrudes sufficiently</p> <p><input type="checkbox"/> Waste pipes protected where penetrating floor slab</p> <p><input type="checkbox"/> Water test & visual on AS3500</p> <p><input type="checkbox"/> One fixture above terminal vent</p> <p><input type="checkbox"/> Level inverts at 2 o'clock (60°) or higher for AS3500</p> <p><input type="checkbox"/> Flood relief floor waste (urinals / multi-units)</p> <p><input type="checkbox"/> S/S straps to support soil & waste pipes</p> <p><input type="checkbox"/> Adequate access provided for cleaning out drains</p> <p><input type="checkbox"/> Waste to commercial machine as per installation specifications (temp > 65°C)</p> <p>Required Documentation</p> <p><input type="checkbox"/> Engineer inspection completed</p> <p>PS4: <input type="radio"/> Received <input type="radio"/> Outstanding <input type="radio"/> NA</p>
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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.]

<p>Work complies with the approved BC documents</p> <p><input type="checkbox"/> PASS</p> <p><input type="checkbox"/> FAIL. Work may proceed to next inspection.</p> <p><input type="checkbox"/> FAIL. Repeat inspection required <input type="checkbox"/> Additional fee</p> <p>Officer Name:</p> <p>Signature : Date:</p>	<p>REPEAT: Work complies with the approved BC documents</p> <p><input type="checkbox"/> PASS</p> <p><input type="checkbox"/> FAIL. Work may proceed to next inspection.</p> <p><input type="checkbox"/> FAIL. Repeat inspection required <input type="checkbox"/> Additional fee</p> <p>Officer Name:</p> <p>Signature: Date:</p>
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