

Applicant's Name:	BC No:
Property Address:	Lot No.: Wind Zone:
ITEMS TO BE CHECKED [Checked against the approved Building Consent (BC) documents]	
Key: Decision: <input checked="" type="checkbox"/> or <input type="checkbox"/> = Pass <input type="checkbox"/> or <input checked="" type="checkbox"/> = Fail, further inspection / documents required <input type="checkbox"/> or <input type="checkbox"/> or <input type="checkbox"/> = Not Applicable Reason for decision: Compliance or non compliance with the approved building consent documents	
REVIEW: <input type="checkbox"/> Approved BC documents and amendments on site <input type="checkbox"/> Prior inspection passed or instructions addressed <input type="checkbox"/> Consent conditions checked	

Final Building

Interior <input type="checkbox"/> Ceiling insulation is in place / clear of light fittings <input type="checkbox"/> Safety glass installed <input type="checkbox"/> Wet areas completed: correct installation of shower / bath / laundry, surface areas sealed <input type="checkbox"/> Kitchen completed <input type="checkbox"/> Smoke alarms installed and operational <input type="checkbox"/> Height of window sashes / restrictors <input type="checkbox"/> Heights of barriers & handrails as per approved plans <input type="checkbox"/> Ventilation to internal spaces <input type="checkbox"/> Mechanical ventilation vented to exterior <input type="checkbox"/> Firewall integrity <input type="checkbox"/> Fire rating complete Heater checklist completed <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA Exterior Pools checklist completed <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA <input type="checkbox"/> Vermin proofing <input type="checkbox"/> Flashing / sealants completed & in place <input type="checkbox"/> Ground height complies (at time of inspection) Landscaping completed: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA <i>(at time of inspection)</i> <input type="checkbox"/> Brick veneer weep and ventilation holes	Exterior (continued) <input type="checkbox"/> Weathering and penetrations: roof and walls (fixings etc.). Flashing / sealants completed & in place <input type="checkbox"/> Construction of decks / steps / retaining walls / handrails, barriers and ramps comply <input type="checkbox"/> Sub floor ventilation <input type="checkbox"/> Exterior finishing's <input type="checkbox"/> Drip edge to flat surfaces <input type="checkbox"/> Reflectivity of finishes CCC application <input type="checkbox"/> Received <input type="checkbox"/> Outstanding <input type="checkbox"/> NA All producer statements <input type="checkbox"/> Received <input type="checkbox"/> Outstanding <input type="checkbox"/> NA Gas certificate(s) <input type="checkbox"/> Received <input type="checkbox"/> Outstanding <input type="checkbox"/> NA Electrical certificate(s) <input type="checkbox"/> Received <input type="checkbox"/> Outstanding <input type="checkbox"/> NA Heater installation statement <input type="checkbox"/> Received <input type="checkbox"/> Outstanding <input type="checkbox"/> NA Waterproofing certificate <input type="checkbox"/> Received <input type="checkbox"/> Outstanding <input type="checkbox"/> NA Records of Work <input type="checkbox"/> Received <input type="checkbox"/> Outstanding <input type="checkbox"/> NA Other: <input type="checkbox"/> Received <input type="checkbox"/> Outstanding <input type="checkbox"/> NA Other: <input type="checkbox"/> Received <input type="checkbox"/> Outstanding <input type="checkbox"/> NA
The above documents will be assessed back at the office. If found to be inadequate, the author will be contacted.	

Comments if required: Photos attached (if relevant) Memo / Instruction No: Verbal instruction (specify):

Final Plumbing / Drainage

BC No.:

Exterior

- Pipes insulated outside building envelope using UV protection where required
- Gully dish heights & position to stop stormwater ingress
- Ensure overflow gully minimum 150 mm below lowest fixture
- All wastes are vented if greater than 3.5 m
- Check terminal vent through roof & check flashing
- Waste pipes sealed at point of entry into rear of gully dishes as per G13 or bends installed tight to gully dish
- Downpipes clipped & connected to stormwater drainage
- Downpipes from top storey roofs to lower roof spreader required (E2/8.1.6, pp.56, Fig. 20). Not allowed for masonry tile roof unless have underlay fitted
- If timber floor: check wastepipe falls and supports
- Drainage discharges into silt trap
- Overflows fitted to deck and Internal gutters run to exterior

Interior

- Smoke alarms installed and operational
- Fire rating complete
- HWC correct type / valves & seismic restraints provided
- HWC expansion / relief drains via tundish installed and conveyed to exterior
- HWC tray in place
- Tub / Toilet cistern fixed securely
- Dishwasher pipe clamped and anti-siphon bend fitted

Water temperature: °C

Commercial

- Waste to commercial machine as per installation specifications (temp > 65°C)
- Bain-marie drains provided to approved outlet
- Plumbing roof penetrations flashed

Documents Required by Building Consent

As Laid plans	<input type="checkbox"/> Received	<input type="checkbox"/> Outstanding	<input type="checkbox"/> NA
Plumber's pressure test (from approved person)	<input type="checkbox"/> Received	<input type="checkbox"/> Outstanding	<input type="checkbox"/> NA
Backflow prevention devices and test certificates	<input type="checkbox"/> Received	<input type="checkbox"/> Outstanding	<input type="checkbox"/> NA
Trade waste approval	<input type="checkbox"/> Received	<input type="checkbox"/> Outstanding	<input type="checkbox"/> NA
Septic tank installation, & effluent field PS4 / Certificate	<input type="checkbox"/> Received	<input type="checkbox"/> Outstanding	<input type="checkbox"/> NA
Stormwater disposal system PS4	<input type="checkbox"/> Received	<input type="checkbox"/> Outstanding	<input type="checkbox"/> NA
Water reuse tank (grey water or retention)	<input type="checkbox"/> Received	<input type="checkbox"/> Outstanding	<input type="checkbox"/> NA
Other:	<input type="checkbox"/> Received	<input type="checkbox"/> Outstanding	<input type="checkbox"/> NA

Comments if required: Photos attached (if relevant) Memo / Instruction No: Verbal instruction (specify):

NOTE: The project must pass final inspections and the BCA must be supplied with the required information as per the Form 5 to an adequate standard, to ensure your CCC can be issued.

OUTCOME OF DECISIONS

[Tick the correct outcome: e.g. PASS or FAIL etc.]

Work complies with the approved BC documents

- PASS
- FAIL. work may proceed to next inspection.
FAIL. Repeat inspection required Additional fee

Officer Name:

Signature :

Date:

REPEAT: Work complies with the approved BC documents

- PASS
- FAIL. Work may proceed to next inspection.
FAIL. Repeat inspection required Additional fee

Officer Name:

Signature:

Date:



ASSESSMENT OF DOCUMENTATION RECEIVED

BC No.:

Key for statement types: Cladding (CL) Electrical (EL) Engineer / Designer (PS4) Gas (GS) Glazing (GL) Insulation (IN) As-laid drainage (ALD) Pressure test (P) Smoke alarm (SM) Sprinklers (SP) Surveyors confirmation of height / siting (SV) Waterproofing (WP) Solar systems (S) Truss layout (TR) Under floor / tile heating (H) Other (O) [specify].....