

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 Service Disconnections <input type="checkbox"/> Water disconnected Plumber's name: Reg. No.: <input type="checkbox"/> Stormwater sealed off Drainlayer's name: Reg. No.: <input type="checkbox"/> Sewer sealed off Drainlayer's name: Reg. No.: <input type="checkbox"/> Septic tank removed or emptied and filled in / collapsed Drainlayer's name: Reg. No.:	<input type="checkbox"/> Power disconnected Electrician's name: Reg. No.: <input type="checkbox"/> Gas disconnected Gas fitter's name: Reg. No.: As laid services plan: <input type="radio"/> Received <input type="radio"/> Outstanding <input type="radio"/> NA Other <input type="checkbox"/> Site cleared BWO / CS : <input type="radio"/> Removed <input type="radio"/> Amended <input type="radio"/> 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:
---	--