

## Request for Second Hand Building Inspection / Report

NOTE: Thames-Coromandel District Council and Matamata-Piako District Council does not offer this service.

INSTRUCTIONS: Complete ALL fields on this form. Put N/A if not applicable. Cross out mistakes don't use white out fluid / tape

### PRESENT LOCATION OF BUILDING

Street No.: ..... Street Name: .....  
Town: .....  
Other information: .....

#### OFFICE ONLY:

Date received: .....

### NEW LOCATION FOR BUILDING

Street No.: ..... Street Name: .....  
Town: .....  
Other information: .....

Consent / PIM No.: .....

Document or Parcel No.: .....

Valuation No.: .....

### THE OWNER

### CONTACT [If not the owner]

Name of Owner: .....  
Mailing address: .....  
Phone Number: .....  
Landline: .....  
Mobile: .....  
Email address: .....

Name of Agent: .....  
Mailing address: .....  
Phone Number: .....  
Landline: .....  
Mobile: .....  
Email address: .....

### DESCRIPTION OF BUILDING

Type [Dwelling, garage etc.]: .....  
Age [Approximately]: ..... Floor area [m<sup>2</sup>]: .....  
Roof material: .....  
Exterior cladding (Brick, weatherboard, etc.): .....

### ATTACHMENTS REQUIRED

(1) Recent photographs that clearly show the condition of all exterior walls. (2) Recent photographs that clearly show the interior fittings and finishes for the kitchen, bathrooms, toilets and laundry. (3) Details of any proposed repairs, upgrading or alterations

### INSPECTION

A Building Officer will arrange a building inspection time with you once this application has been processed. The applicant must arrange for entry to the building at this agreed time so that the officer can inspect the interior and exterior of the building.

### CHARGES

All fees must be paid prior to the inspection being booked.

Mileage is payable on inspections where travel is more than ..... km from the nearest

Council office. This charge is \$..... per km one way.

Fee \$.....

Mileage \$.....

Total \$.....

**DECLARATION** Signed by the ☐ APPLICANT or by the ☐ AGENT on behalf of and with the authority of the APPLICANT

Print Name: ..... Signature: ..... Date: .....