



ASHBURTON DISTRICT COUNCIL

5 Baring Square West, Ashburton, New Zealand
e-mail info@adc.govt.nz Website www.ashburtondc.govt.nz

(BAM 002-A)

Amended Building Consent Application

(Version No: 1.0.1 – 1 July 2007)

(Only complete items that are applicable to your project)

FOR OFFICE USE ONLY

Project No:

Date Received:

APPLICATION

I request that you issue an amendment to a Building Consent already issued for the building work described in this application.

Original Building Consent Number:

THE BUILDING

Street Address (or Rapid No if applicable):		Building Name (if applicable):	
<input type="text"/>		<input type="text"/>	
Legal Description: Lot:	DP:	Valuation Roll Number:	
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Number of Levels:	Level/Unit No:	Total Floor Area: (all floors included)	
<input type="text"/>	<input type="text"/>	Existing: <input type="text"/> m ² Add: <input type="text"/> m ²	
Current lawfully established use:		Approx year building first constructed:	
<input type="text"/>		<input type="text"/>	

THE PROJECT

Description of amended work:

Estimated Value of Amended Work (inc GST): (In addition to, or reduction from, what was stated with the original application):

\$ Addition Reduction No Change

Associated Resource Consents:
(Please provide project reference numbers)

THE OWNER

Owner's Name:	Contact Person: (if owner is not an individual)
<input type="text"/>	<input type="text"/>
Mailing/Billing Address:	
<input type="text"/>	
Street Address/Registered Office:	
<input type="text"/>	
E-mail Address:	Phone Day:
<input type="text"/>	<input type="text"/>
Phone A'Hours:	Fax:
<input type="text"/>	<input type="text"/>
Cellphone:	
<input type="text"/>	

THE AGENT

Note - The Agent will be the first point of contact for communications with the Council/Building Consent Authority regarding this application/building work and will receive all correspondence including all invoices.

Agent's Name:	Contact Person: (if Agent is not an individual)
<input type="text"/>	<input type="text"/>
Mailing/Billing Address:	
<input type="text"/>	
Street Address/Registered Office:	
<input type="text"/>	
E-mail Address:	Phone Day:
<input type="text"/>	<input type="text"/>
Phone A'Hours:	Fax:
<input type="text"/>	<input type="text"/>
Cellphone:	
<input type="text"/>	

REQUIRED ATTACHMENTS

Evidence of ownership attached to this application:

Certificate of Title Sale and Purchase Agreement

REQUIRED ATTACHMENTS (continued)

<input type="checkbox"/>	Original consented plans that are to be amended
<input type="checkbox"/>	Project Information Memorandum
<input type="checkbox"/>	2 copies of amended plans, including all construction details, with amendments highlighted or clouded
<input type="checkbox"/>	Application Amendment Fee Application fee \$ (if applicable)

KEY PERSONNEL

Name of Builder:		Registration Number:
Mailing Address:		
E-mail Address:	Phone Day:	
Name of Craftsman Plumber:		Registration Number:
Mailing Address:		
E-mail Address:	Phone Day:	
Name of Registered Drainlayer:		Registration Number:
Mailing Address:		
E-mail Address:	Phone Day:	
Name of Craftsman Gasfitter:		Registration Number:
Mailing Address:		
E-mail Address:	Phone Day:	
Name of Designer:		Registration Number:
Mailing Address:		
E-mail Address:	Phone Day:	
Name of Engineer:		Registration Number:
Mailing Address:		
E-mail Address:	Phone Day:	

OTHER

Has the engineer provided a Producer Statement – Design?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Has the engineer been engaged to carry out site inspections on the job?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

(If yes, these must be specified on the Producer Statement)

NOTES BY APPLICANT (Other notes or comments which you as the applicant may wish to add)

SIGNATURE

Signed by or for and on behalf of the Owner: _____

Owner Agent Date: _____

Note: If acting "for and on behalf", please read the following declaration before signing: "I hereby declare that I am authorised to act as Agent of the Owner".

We require our plans and/or specifications to remain confidential

Date Paid		Receipt Number		Invoice Number	
Date Paid		Receipt Number		Invoice Number	

NOTES

- This does not apply to building consents that already have a Code Compliance Certificate issued.
- This application is for minor amendments to issued building consents. It is not intended to be used where the scope of work is extended.
- Processing fees (plus any additional Building or Building Research Levies) are to be paid before any work covered by the amendment may proceed.