**Application for a building consent for the installation of a backflow prevention device**

**Section 33 or Section 45, Building Act 2004, Building (Forms) Regulations 2004 – Form 2**

|  |
| --- |
| **About this form*** Please check on our website ([ccc.govt.nz/building-consent-forms-and-guides](https://www.ccc.govt.nz/building-consent-forms-and-guides)) that the form you are using is current at the time of application as forms are subject to change without notice.
* This application form has been developed to be used by building owners who have received a letter from the Council requesting them to install a backflow prevention device. For applications where a letter has not received, please apply for building consent [online](https://www.ccc.govt.nz/consents-and-licences/building-consents/apply-for-a-building-consent/) via online services. Further guidance on backflow prevention is available on our website at [ccc.govt.nz/backflow-prevention](https://ccc.govt.nz/services/water-and-drainage/water-supply/connections/backflow-prevention).
* Other general information can be found on our website at [ccc.govt.nz/consents-and-licences](http://www.ccc.govt.nz/consents-and-licences). For general enquiries please phone (03) 941 8999 or email info@ccc.govt.nz. Refer to the current fees and charges on our website at [ccc.govt.nz/fees-building-control](https://ccc.govt.nz/fees-building-control). Note, when applying for a building consent the costs/charges will vary depending on the time a building consent officer spends processing your consent.
* A building consent is the formal approval issued by a Building Consent Authority (BCA) to ensure certain works meet the requirements of the Building Act 2004, Building Regulations and the New Zealand Building Code.
* Christchurch City Council reserves the right, from time to time, to contact customers in regard to the services provided.

**Complete this form and submit via the following methods:*** **Email:**  backflowconsents@ccc.govt.nz
* **Post:** *(additional costs apply)* Building Consenting, PO Box 73013, Christchurch 8154
* **Hand delivered:** *(additional costs apply)* Civic Offices, 53 Hereford Street, Christchurch Central or dropped off at any Council service desk ([ccc.govt.nz/contact-us](https://ccc.govt.nz/contact-us)).
* **Online** via [onlineservices.ccc.govt.nz](http://onlineservices.ccc.govt.nz). You will need to register to use Online Services. You can register at [onlineservices.ccc.govt.nz](http://onlineservices.ccc.govt.nz)
 |

*Please complete all fields unless marked otherwise*

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **1. The building****Street address of building:** *(for structures that do not have a street address, state the nearest street intersection and the distance and direction from that intersection)*

|  |
| --- |
|  |

**Legal description of land where building is located:** *(state legal description as at the date of application and, if the land is proposed to be subdivided, include details of relevant lot numbers and subdivision consent)*

|  |
| --- |
|  |

**Building name:**

|  |
| --- |
|  |

**Location of building within site/block number:** *(include nearest street access)*

|  |
| --- |
|  |

|  |  |
| --- | --- |
| **Number of levels:** *(including ground level and any levels below ground)* | **Level/unit number:** |
|  |  |

**Area:** *(total floor area; indicate area affected by the building work if less than the total area)*

|  |  |  |
| --- | --- | --- |
| Total floor area: | Existing floor area: | New floor area: |
|  |  |  |

|  |  |
| --- | --- |
| **Current, lawfully established, use:***(include number of occupants per level and per use if more than 1)* | **Year first constructed:** |
|  |  |

 |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **2. The owner (All details must be the owner’s)****Name of owner:** *(include preferred form of address, e.g. Mr, Mrs, Ms, Miss, Dr if an individual)*

|  |
| --- |
|  |

**Contact person:** *(not required if the applicant is an individual)must have a New Zealand address)*

|  |
| --- |
|  |

**Mailing address:**

|  |
| --- |
|  |

**Street address/Registered office:** *(if different than above)*

|  |
| --- |
|  |

**Phone number:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Landline: | Mobile: | Daytime: | After hours: | Fax: |
|  |  |  |  |  |

|  |  |
| --- | --- |
| **Email address:** | **Website:** |
|  |  |

**The following evidence of ownership** **is attached to this application:***(copy of certificate of title, lease, agreement for sale and purchase, or other document showing full name of legal owner(s) of the building)*

|  |
| --- |
| [ ]  Certificate of title [ ]  Lease [ ]  Agreement for sale and purchase [ ]  Other document |

 |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **3. Agent (Only required if the application is being made on behalf of the owner)****Name of agent:** *(only required if application is being made on behalf of the owner)*

|  |
| --- |
|  |

**Contact person:** *(not required if the applicant is an individual. Must have a New Zealand address)*

|  |
| --- |
|  |

**New Zealand Companies Registered Number:** *(If applicable - Refer to* [*www.business.govt.nz/companies*](http://www.business.govt.nz/companies) *)*

|  |
| --- |
|  |

**Mailing address:**

|  |
| --- |
|  |

**Street address/Registered office:** *(if different than above)*

|  |
| --- |
|  |

**Phone number:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Landline: | Mobile: | Daytime: | After hours: | Fax: |
|  |  |  |  |  |

|  |  |
| --- | --- |
| **Email address:** | **Website:** |
|  |  |

 |
| **Relationship to owner:** *(state details of the authorisation from the owner to make the application on the owner’s behalf)*

|  |
| --- |
|  |

**First point of contact for communications with the council/building consent authority**: *(contact details must be in New Zealand, mark boxes as appropriate)*

|  |  |  |  |
| --- | --- | --- | --- |
| [ ]  Agent | [ ]  Owner | [ ]  Other | ***If other****, please specify whom and provide contact details as per above:* |
|  |  |  |  |

 |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **4. Application****I request that you issue a building consent for the building work described in this application.**

|  |
| --- |
| **I wish to receive my building consent/PIM and approved documentation in the following format:** |
| [ ]  Electronically via Online Services | [ ]  Hard copy *(additional costs apply)* |  |
|  | **If hard copy** - to be collected from Civic Offices or any Council service desk ([ccc.govt.nz/contact-us](https://www.ccc.govt.nz/contact-us)): |
|  |  |
|  |
|  |
| **All consent related invoices to be billed and sent via:** |
| [ ]  **email or** | **to:** | [ ]  Owner | [ ]  Agent | [ ]  Other | **If other**, please provide contact name. company, postal address and/or email: |
| [ ]  **post** |  |  |  |  |  |
| All of the included information on this form is, to the best of my knowledge, true and correct. I understand that all plans, documentation and reports submitted as part of an application are required to be kept available for public record, therefore the public (including business organisations and other units of the Council) may view this application, once submitted. All development contributions charges (where applicable) will be billed to the owner(s) as shown on page one. Please also note that for any refund due, the refund will be credited to the “deserving party” who may not have been the original “payee”.I / we understand that no work is to commence until the building consent is issued. If you are signing this application on behalf of a company/trust/other entity (the applicant), you are declaring that you are duly authorised to sign on behalf of the applicant to make such an application.By signing this application you are accepting responsibility to pay all actual and reasonable costs incurred by the Christchurch City Council. Where an invoiced amount has not been paid by the invoice due date the Council may commence debt recovery action. The Council reserves the right to charge interest, payable from the date the debt became due, and recover costs incurred in pursuing recovery of the debt. |

|  |  |  |  |
| --- | --- | --- | --- |
| **Signature of:**  | [ ]  owner / [ ]  agent on behalf of, and with the authority of the owner |  |  |
|  |  |  |  |
| **Print name:** |  | **Date:** |  |

**PRIVACY INFORMATION:**If you would like to request access to, or correction of, your details, please contact the Council. |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **5. The project****Description of the building work:**

|  |
| --- |
|  |

|  |  |
| --- | --- |
| **Did the Christchurch City Council's Three Waters Unit request the installation of this device?** | [ ]  Yes [ ]  No |
| * **If no**, please apply for a building consent [online](https://www.ccc.govt.nz/consents-and-licences/building-consents/building-consent-forms-and-guides/) via online services.
 |

|  |  |
| --- | --- |
| **Is the backflow prevention device to be installed on a sprinkler system or other specified system which requires a dedicated water supply?** | [ ]  Yes [ ]  No |
| * **If yes** provide details:
 |  |
| **Hazard type?** | [ ]  Medium [ ]  High |
| **Location?** | [ ]  Point of supply [ ]  Internal protection |
| **Estimated value of work** *(incl. GST)*: | $ |  |

 |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **6. Restricted building work**

|  |  |
| --- | --- |
| **Will the building work include any restricted building work?** | [ ]  No [ ]  Yes  |

(e.g. Alterations to the primary structure or external moisture management system. The installation of a backflow prevention device is not likely to be restricted building work.)**If Yes, provide the following details of all licensed building practitioners who will be involved in carrying out or supervising the restricted building work.** (If these details are unknown at the time of the application, they must be supplied before the building work begins.)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name** | **Licensing class** | **Licensed building practitioner number** (or registration number if treated as being licensed under section 291 of Act) | **Record attached?**(eg Certificate of design work, Record of building work)  | **Access to download BC approved?** |
|  |  |  |  | [ ]  Yes |
|  |  |  |  | [ ]  Yes |
|  |  |  |  | [ ]  Yes |

*Note: Continue on another page if necessary* |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **7. Building consent****The following plans and specifications are attached to this application:**

|  |
| --- |
|  |

**The building work will comply with the building code as follows:**

| **Clause***(select relevant clause numbers of building code)* | **Means of compliance***(refer to the relevant acceptable solution or verification method or detail of alternative solution in the plans and specifications)* | **Waiver/Modification required***(state nature of waiver or modification of building code required)* |
| --- | --- | --- |
| [ ]  B2 - Durability |  |  |
| [ ]  G12 – Water Supplies |  |  |

 |

|  |
| --- |
| **8. Attachments****The following documents are attached to this application:**[ ]  Provide a plan showing:* An accurate site plan is required that identifies the location of the backflow prevention device with relation to the buildings and site boundaries.
* The use of this backflow prevention device and what it is protecting is to be shown on this plan.
* All water connections to the site must be identified.
* Provide details of the make, model and size of the backflow prevention device(s).
 |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **9. Compliance Schedule**[ ]  **The specified systems for the building are as follows:** *(specified systems are defined in the regulations)*[ ]  **The following specified systems are being altered, added to, or removed in the course of the building work:**[ ]  **There are no specified systems in the building.**Specified systems are defined in the Building (Specified Systems, Change the Use, and Earthquake-prone Buildings) Regulations 2005. Backflow prevention devices are specified systems. The application for building consent must include the performance standards and inspection maintenance and reporting procedures for the specified systems. The table below can be used to provide these details:

|  |  |
| --- | --- |
| **System description**: Automatic backflow preventer to AS/NZS 2845.1 connected to potable water supply | **System modified by** *(select one)*: |
| [ ]  Added [ ]  New [ ]  Altered |
| Location(s): |  |
| Performance standards: | AS/NZS 2845.1:2010 |
| Inspection, maintenance and reporting procedures: | Field testing and maintenance of testable devices as specified by AS2845.3:2010 and NZ backflow testing standard 2011. |
| Frequency of inspections: | Annually |
| Maintained and Inspected by: | Independent qualified person: |

 |