



**WBCA 006-H**

**Code Compliance Certificate Application  
 for a Solid/Liquid Fuel Heater**

*(Only complete items that are applicable to your project)*

<b>FOR OFFICE USE ONLY</b>	
Project No:	
Date Received:	

APPLICATION			
Street Address (or Rapid No if applicable):		Legal Description: Lot:	DP:
		Valuation Roll Number:	
Project Memorandum No.		Building Consent No.	
Type of Building work: (eg. Domestic Dwelling)			
Building Consent issued by: (Name of Building Consent Authority)			
<b>Address Code Compliance Certificate to be posted to:</b>			
THE OWNER			
Owner's Name:		Contact Person: <i>(if owner is not an individual)</i>	
Mailing/Billing Address:			
Street Address/Registered Office:			
E-mail Address:		Phone Day:	
Phone A'Hours:	Fax:	Cellphone:	
THE AGENT			
<i>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.</i>			
Agent's Name:		Contact Person: <i>(if Agent is not an individual)</i>	
Mailing/Billing Address:			
Street Address/Registered Office:			
E-mail Address:		Phone Day:	
Phone A'Hours:	Fax:	Cellphone:	
KEY PERSONNEL			
<b>Name of Designer:</b>			Registration Number:
Mailing Address:			
E-mail Address:		Phone Day:	
<b>Name of Engineer:</b>			Registration Number:
Mailing Address:			
E-mail Address:		Phone Day:	
<b>Name of Craftsman Plumber:</b>			Registration Number:
Mailing Address:			
E-mail Address:		Phone Day:	

<b>Name of Registered Drainlayer:</b>		Registration Number:
Mailing Address:		
E-mail Address:	Phone Day:	
<b>KEY PERSONNEL (continued)</b>		
<b>Name of Registered Electrician:</b>		Registration Number:
Mailing Address:		
E-mail Address:	Phone Day:	
<b>Name of Craftsman Gasfitter:</b>		Registration Number:
Mailing Address:		
E-mail Address:	Phone Day:	
Add any additional people on another sheet.		
<b>NOTES BY APPLICANT (Other notes or comments which you as the applicant may wish to add)</b>		
<b>SIGNATURE</b>		
<input type="checkbox"/> I request that you issue a Code Compliance Certificate for this work under Section 95 of the Building Act 2004.		
Signed by or for and on behalf of the Owner: _____		
<input type="checkbox"/> Owner <input type="checkbox"/> Agent      Date: _____		
<b>Note:</b> 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".		

**ADDITIONAL INFORMATION TO NOTE**

1. A final inspection must have been completed prior to this application being sought.
2. The Code Compliance Certificate will be based on the approved building consent documents, so any variations to the original approved plans are required to be documented and approved prior to the work being carried out.
3. A Code Compliance Certificate will not be issued until all of the information required on this form that is relevant to the job is provided to the Council. This includes all Names, Certificates from personnel who carried out the work, Registration Numbers, Producer Statements, or any other required documents.
4. Certificates that relate to energy work (Electrical and Gasfitters).
5. The specified systems are listed on the attached form are to be contained in the compliance schedule for the building. In the opinion of the personnel who installed them, they are capable of performing to the performance standards set out in the building consent.

<b>COMPLIANCE CHECK LIST FOR THE INSTALLATION OF</b> (Must be Completed)			
Solid Fuel Heater	Liquid Fuel Heater	Free standing	Inbuilt
Make: <input style="width: 90%;" type="text"/>	Model: <input style="width: 90%;" type="text"/>	Registration No. <input style="width: 90%;" type="text"/>	
		Tick as Appropriate	Yes    No    N/A
• The existing chimney has been cleaned prior to installation		<input type="checkbox"/>	<input type="checkbox"/>
• Is the fireplace surround/chimney face junction sealed up with heat resistant material		<input type="checkbox"/>	<input type="checkbox"/>
• The flue pipe is constructed of austenitic stainless steel		<input type="checkbox"/>	<input type="checkbox"/>
• Seismic restraint has been fitted		<input type="checkbox"/>	<input type="checkbox"/>
• The flue sections are secured together with stainless steel rivets		<input type="checkbox"/>	<input type="checkbox"/>
• The flue is secured to the appliance		<input type="checkbox"/>	<input type="checkbox"/>
• The chimney void has been vented at the top		<input type="checkbox"/>	<input type="checkbox"/>
• Flue and appliance clearances have been achieved in terms of the manufacturer's instructions NZS 7421 or AS/NZS 2918		<input type="checkbox"/>	<input type="checkbox"/>
• The flue height meets the minimum specified in the manufacturer's instructions, NZS 7421 and Regional Council Rules.		<input type="checkbox"/>	<input type="checkbox"/>
• The appliance has been installed and commissioned in accordance with the manufacturer's installation and operating instructions. (Liquid fuel only.)		<input type="checkbox"/>	<input type="checkbox"/>
• The liquid fuel storage tank and feed system has been installed in accordance with AS 1691 or equivalent		<input type="checkbox"/>	<input type="checkbox"/>
• Smoke detectors as detailed on the building consent documents are installed.		<input type="checkbox"/>	<input type="checkbox"/>
• If response to any of the items is 'no' please comment:			
Water Heater – Model and Part Number: <input style="width: 90%;" type="text"/>			

<b>CERTIFICATION</b>	
I <input style="width: 90%;" type="text"/>	<i>(print name)</i>
certify that the above specified installation has been carried out as described and in accordance with the manufacturer's installation instructions and the current approved building code requirements.	
Installer's Signature: <input style="width: 90%;" type="text"/>	Date: <input style="width: 90%;" type="text"/>

<b>RESOURCE MANAGEMENT ACT MATTERS – LIQUID FUEL HEATER</b>					
• Does the fuel storage tank have secondary containment in accordance with the District Plan  (NB: Audit monitoring will be carried out).	<table style="margin: auto;"> <tr> <th style="font-size: small;">Yes</th> <th style="font-size: small;">No</th> </tr> <tr> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table>	Yes	No	<input type="checkbox"/>	<input type="checkbox"/>
Yes	No				
<input type="checkbox"/>	<input type="checkbox"/>				
• If response is "no" please comment why:					