

Producer statement construction (PS3)

All sections of this PS3 must be completed

Tick applicable Contractor for:

- | | | | |
|---|--|---|------------------------------------|
| <input type="checkbox"/> Building | <input type="checkbox"/> Emergency Lighting | <input type="checkbox"/> Cladding | <input type="checkbox"/> Escalator |
| <input type="checkbox"/> Waterproof Membranes | <input checked="" type="checkbox"/> Drainlayer | <input type="checkbox"/> Fire Alarm | <input type="checkbox"/> Lift |
| <input type="checkbox"/> Mechanical (HVAC) | <input type="checkbox"/> Solar Heating | <input type="checkbox"/> Other (specify): _____ | |

Author name:

Sam Aitken

Author company:

Brooklyn Services Ltd

Site address:

53 Marshall St

Description of building work:

Relayed sewer and stormwater to boundary

Owners Details:

Karam Gosain

Scope of work covered by statement:

Foul water drainage and storm water to boundary

System/Product used (if applicable):

100mm upvc sn6 and drainage chip

I (constructor): Sam Aitken

Karam Gosain have been engaged by _____ (applicant, designer, main contractor etc) part all to construct:

As specified in the attached particulars of Building Consent Number: _____ and its attached conditions

I am satisfied on reasonable grounds that the building work specified above has been completed to the extent required by that Building Consent and complies with the NZ Building Code.

- NZBC clauses: *[select as applicable]*
- | | | | | | | | | | | | | |
|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|------------------------------|------------------------------|------------------------------|---|--|------------------------------|-----------------------------|
| <input type="checkbox"/> B1 | <input type="checkbox"/> B2 | <input type="checkbox"/> C1 | <input type="checkbox"/> C2 | <input type="checkbox"/> C3 | <input type="checkbox"/> C4 | <input type="checkbox"/> C5 | <input type="checkbox"/> C6 | <input type="checkbox"/> D1 | <input type="checkbox"/> D2 | <input checked="" type="checkbox"/> E1 | <input type="checkbox"/> E2 | <input type="checkbox"/> H1 |
| <input type="checkbox"/> E3 | <input type="checkbox"/> F1 | <input type="checkbox"/> F2 | <input type="checkbox"/> F3 | <input type="checkbox"/> F4 | <input type="checkbox"/> F5 | <input type="checkbox"/> F6 | <input type="checkbox"/> F7 | <input type="checkbox"/> F8 | <input type="checkbox"/> G1 | <input type="checkbox"/> G2 | <input type="checkbox"/> G3 | |
| <input type="checkbox"/> G4 | <input type="checkbox"/> G5 | <input type="checkbox"/> G6 | <input type="checkbox"/> G7 | <input type="checkbox"/> G8 | <input type="checkbox"/> G9 | <input type="checkbox"/> G10 | <input type="checkbox"/> G11 | <input type="checkbox"/> G12 | <input checked="" type="checkbox"/> G13 | <input type="checkbox"/> G14 | <input type="checkbox"/> G15 | |

I understand that this Producer Statement, if accepted, may be relied on by the Council for the purpose of establishing compliance with the Building Consent.

Registration No:

19169

Or

N/A

Qualifications/Experience:

Certifying Plumber / Drainlayer

Address:

211 Cashmere Rd

Postcode:

8025

Phone:

021841746

Fax:

Mobile:

Email:

sam.bsl@icloud.com

Signature:

S.W. Aitken

Date:

12/12/2025

CE 100A

