

# Application Summary

Generated 20 September 2024

Form 6

Application for code compliance certificate

Section 92, Building Act 2004

This document summarises the application data received from the customer via Online Services.

## Application

Type	Code compliance certificate
Application number	BLD/2024/1419
Description	Application for CCC
Date	19 September 2024

## Location

Property	191 Marshland Road Shirley
Title	CT-558/63
Legal description of the land where building is located	Lot 9 DP 16288

## Names

	Registered user	Owner
Name	Daddy Pig Properties Limited	Daddy Pig Properties Limited
Street Address	[REDACTED]	[REDACTED]
E-mail	[REDACTED]	[REDACTED]
Phone	[REDACTED]	[REDACTED]
SAP ID	[REDACTED]	[REDACTED]

## Application form details inputted from Online Services

### The building consent(s)

Description, e.g., Application for CCC	Application for CCC
Building consent number(s) (write the number of the building consent, e.g., BCN/2013/9999) issued by Christchurch City Council	BCN/2023/5097
All building work to be carried out under the building consent specified on this form was completed on (DD/MM/YYYY) Eg date of passed final inspection	10/09/2024

## The owner

Name of owner (include preferred form of address, e.g. Mr, Mrs, Ms, Miss, Dr if an individual)	Daddy Pig Properties Limited
Contact person (not required if owner is an individual)	[REDACTED]
Mailing address	[REDACTED]
Street address/Registered office (if different than above)	[REDACTED]
Contact number	[REDACTED]
Email address	[REDACTED]
Record of title	Yes
Lease	No
Agreement for sale and purchase	No
Other document	No

## Agent

Name of agent	
Contact person	
Mailing address	
Street address/Registered office (if different than above)	
Contact number	
Email address	
Relationship to owner (state details of the authorisation from the owner to make the application on the owner's behalf)	
Agent	No
Owner	No
Other	No

If first point of contact for this application is Other, please provide contact details

## Restricted building work

Name	George Russell
Licensing class	Carpentry
Licensed building practitioner number (or registration number if treated as being licensed under section 291 of Act)	BP131284
Particular work carried out or supervised	Carpentry
Name	Tom Wilson
Licensing class	Carpentry
Licensed building practitioner number (or registration number if treated as being licensed under section 291 of Act)	BP130906

Particular work carried out or supervised  
Name  
Licensing class  
Licensed building practitioner number (or registration number if treated as being licensed under section 291 of Act)

Carpentry  
Yanislav Dimitrov  
Brick & block laying

BP126120

Particular work carried out or supervised  
Name  
Licensing class  
Licensed building practitioner number (or registration number if treated as being licensed under section 291 of Act)

Bricklaying  
Hayden Vessey  
Carpentry

BP101628

Particular work carried out or supervised  
Name  
Licensing class  
Licensed building practitioner number (or registration number if treated as being licensed under section 291 of Act)

Foundations  
Peter Reid  
Roofing

BP102419

Particular work carried out or supervised  
Name  
Licensing class  
Licensed building practitioner number (or registration number if treated as being licensed under section 291 of Act)

- Select one

Particular work carried out or supervised

## Other personnel

Name  
Address  
Contact number  
Licensing class  
Licensed building practitioner numbers or Plumbers, Gasfitters, and Drainlayers Board registration numbers (where relevant and if not provided above)

Andrew Hunter  
  
0212686282  
Plumber  
18060

Name  
Address  
Contact number  
Licensing class  
Licensed building practitioner numbers or Plumbers, Gasfitters, and Drainlayers Board registration numbers (where relevant and if not provided above)

Craig Stewart  
  
0224177894  
Drainlayer  
24916

Name	Alan Hale
Address	
Contact number	02790226109
Licensing class	Electrician
Licensed building practitioner numbers or Plumbers, Gasfitters, and Drainlayers Board registration numbers (where relevant and if not provided above)	E264537
Name	
Address	
Contact number	
Licensing class	- Select one
Licensed building practitioner numbers or Plumbers, Gasfitters, and Drainlayers Board registration numbers (where relevant and if not provided above)	
Name	
Address	
Contact number	
Licensing class	- Select one
Licensed building practitioner numbers or Plumbers, Gasfitters, and Drainlayers Board registration numbers (where relevant and if not provided above)	
Name	
Address	
Contact number	
Licensing class	- Select one
Licensed building practitioner numbers or Plumbers, Gasfitters, and Drainlayers Board registration numbers (where relevant and if not provided above)	

### Compliance schedule

THERE ARE NO SPECIFIED SYSTEMS IN THE BUILDING	Yes
SS1 – Automatic systems for fire suppression	No
SS2 – Emergency warning systems	No
SS3/1 – Automatic door	No
SS3/2 – Access controlled doors	No
SS3/3 – Interfaced fire or smoke doors or windows	No
SS4 – Emergency lighting systems	No
SS5 – Escape route pressurisation systems	No
SS6 – Riser mains	No
SS7 – Automatic back-flow preventers	No
SS8/1 – Passenger carrying lifts	No
SS8/2 – Service lifts	No

Civic Offices, 53 Hereford Street, Christchurch 8011  
 PO Box 73013, Christchurch 8154  
 Phone: 03 941-8999, Fax: 03 941-8792

SS8/3 – Escalator and moving walks	No
SS9 – Mechanical ventilation or air conditioning systems	No
SS10 – Building maintenance units	No
SS11 – Laboratory fume cupboards	No
SS12/1 – Audio loops	No
SS12/2 – FM radio and infrared beam transmission systems	No
SS13/1 – Mechanical smoke control	No
SS13/2 – Natural smoke control	No
SS13/3 – Smoke curtains	No
SS14/1 – Emergency power systems	No
SS14/2 – Signs for SS1-13	No
SS15/1 – Spoken information to facilitate evacuation	No
SS15/2 – Final exits	No
SS15/3 – Fire separations	No
SS15/4 – Signs for facilitating evacuation	No
SS15/5 – Smoke separations	No
SS16 – Cable cars	No

## Application

The code compliance certificate should be sent via	Email
To owner	Yes
To agent	No
All consent related invoices to be billed and sent via	Email
To owner	No
To agent	No

## Attachments

The following documents are attached to this application:

Other documents from the personnel who carried out the work	Yes
Memoranda from licensed building practitioner(s) stating what restricted building work they carried out or supervised (Record of Building Work)	Yes
Certificates that relate to the energy work	Yes
Evidence that specified systems are capable of performing to the performance standards set out in the building consent	No

File 1 - Evidence of ownership	\\\\CCOPTHP104\\pathway\\PathDocs\\CDC\\EAP_467600_groupfield_1_atta chmentfile_RPW-330802-0-2-1 title 191 Marshland Road.pdf
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File 2 - Energy work certificates	\\\\CCOPTHPI04\\pathway\\PathDocs\\CDC\\EAP_467600_groupfield_2_attachmentfile_Electrical Coc 191 Marshland Road Unit 1.pdf
File 3 - Records of work	\\\\CCOPTHPI04\\pathway\\PathDocs\\CDC\\EAP_467600_groupfield_3_attachmentfile_Builder memorandum-record-of-building-work Tom Wilson-signed.pdf
Additional information 4	\\\\CCOPTHPI04\\pathway\\PathDocs\\CDC\\EAP_467600_groupfield_4_attachmentfile_Electrical Coc Marshland Road 191 unit 2.pdf
Additional information 5	\\\\CCOPTHPI04\\pathway\\PathDocs\\CDC\\EAP_467600_groupfield_5_attachmentfile_191 Marshlands Rd Hunter Plumbing.pdf
Additional information 6	\\\\CCOPTHPI04\\pathway\\PathDocs\\CDC\\EAP_467600_groupfield_6_attachmentfile_191 Marshlands Road ROW Roof.pdf
Additional information 7	\\\\CCOPTHPI04\\pathway\\PathDocs\\CDC\\EAP_467600_groupfield_7_attachmentfile_14815 PS4 Constructure Documentation.pdf
Additional information 8	\\\\CCOPTHPI04\\pathway\\PathDocs\\CDC\\EAP_467600_groupfield_8_attachmentfile_Bricklayer - Record of Works H0150 copy.pdf
Additional information 9	\\\\CCOPTHPI04\\pathway\\PathDocs\\CDC\\EAP_467600_groupfield_9_attachmentfile_Drainage Marshlands Rd PS.pdf
Additional information 10	\\\\CCOPTHPI04\\pathway\\PathDocs\\CDC\\EAP_467600_groupfield_10_attachmentfile_Drainage Marshlands Rd Asbuilt.pdf
Additional information 11	\\\\CCOPTHPI04\\pathway\\PathDocs\\CDC\\EAP_467600_groupfield_11_attachmentfile_Geo tech PS4 - 191 Marshlands Road.pdf
Additional information 12	\\\\CCOPTHPI04\\pathway\\PathDocs\\CDC\\EAP_467600_groupfield_12_attachmentfile_Windows Declaration of Performance Vistalite.pdf
Additional information 13	\\\\CCOPTHPI04\\pathway\\PathDocs\\CDC\\EAP_467600_groupfield_13_attachmentfile_191 Marshlands Roadfoundation-record-of-building-work.pdf

## Memos

Application Lodgement Information Not Updated into Pathway

Lodgement Date Time : >2024-09-19T16:10:37.1515886+12:00<

Email Address :



## References

Online Services ID	467600
Online Services transaction reference	DA-467600
Online Services user name	DPIGNZ



# ELECTRICAL CERTIFICATE OF COMPLIANCE & ELECTRICAL SAFETY CERTIFICATE

REFERENCE/CERTIFICATE ID No.:

This form has been designed to be used by licensed electrical workers to certify that installations or Part installations under Part 1 or Part 2 of AS/NZS 3000 are safe to be connected to the specified system of electrical supply.

Location Details:

Contact Details: (Name and address)

Name of Electrical worker:  Registration/Practising licence number:

Phone & email:

Name and registration number of person(s) supervised:

## Certificate of Compliance

Type of work:  Addition  Alteration  New work  
The prescribed electrical work is:  Low risk  General  High-risk (Specify):

Means of compliance:  Part 1 of AS/NZS 3000  Part 2 of AS/NZS 3000

Additional Standards or electrical code of practice were required:  No  Yes (specify):

Date or range of dates that prescribed electrical work undertaken:

Contains fittings that are safe to connect to a power supply?  Yes  No

Specify type of supply system:

The installation has an earthing system that is correctly rated (where applicable)  Yes  No

Parts of the installation to which this certificate relates that are safe to connect to a power supply?  
 All  Parts (specify)

The work relies on manufacturers instructions:  Yes  No

If yes – identify the instruction manual including name, date and version. Also attach a copy of manufacturer’s instructions to this certificate. (Or provide reference to readily accessible electronic format, eg Internet link.)  
Identify:   
Link:

The work has been done in accordance with a certified design:  Yes  No

If yes – identify the certified design including name, date and version. Also attach a copy of the certified design to this certificate. (Or provide reference to readily accessible electronic format, eg Internet link.)  
Identify:   
Link:

The work relies on a Supplier Declaration of Conformity (SDoC):  Yes  No

If yes - identify the SDoC including name, date and version OR EESS registration. Also attach a copy of the SDoC to this certificate. (Or provide reference to readily accessible electronic format, eg Internet link.)  
Identify:   
Link:

The installation has been satisfactorily tested in accordance with the Electricity (Safety) Regulations 2010  No  Yes

<b>Description of Work:</b> 63a single phase - new 2 Bed house wiring (whole installation)  rcd protected power and lighting circuits	Test Results (provide values)	
	Polarity (Independent earth):	
	Insulation resistance:	Ohms
	Earth Continuity:	Ohms
	Bonding:	Ohms
	Fault Loop impedance	Ohms
	Other (specify):	

By signing this document I certify that the completed prescribed electrical work to which this Certificate of Compliance applies has been done lawfully and safely, and the information in the certificate is correct.

Certifier’s signature:  Date:

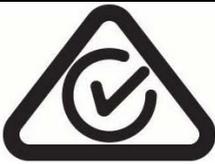
## Electrical Safety Certificate

By signing this document I certify that the installation, or part of the installation, to which this Electrical Safety Certificate applies is connected to a power supply and is safe to use.

Certifier’s name:  Registration/Practising licence number:

Certifier’s signature:  Certificate Issue Date:  Connection Date:

CUSTOMER COPY – THIS IS AN IMPORTANT DOCUMENT AND SHOULD BE RETAINED FOR A MINIMUM OF 7 YEARS



# ELECTRICAL CERTIFICATE OF COMPLIANCE & ELECTRICAL SAFETY CERTIFICATE

REFERENCE/CERTIFICATE ID No.:

This form has been designed to be used by licensed electrical workers to certify that installations or Part installations under Part 1 or Part 2 of AS/NZS 3000 are safe to be connected to the specified system of electrical supply.

Location Details:

Contact Details: (Name and address)

Name of Electrical worker:  Registration/Practising licence number:

Phone & email:

Name and registration number of person(s) supervised:

## Certificate of Compliance

Type of work:  Addition  Alteration  New work  
The prescribed electrical work is:  Low risk  General  High-risk (Specify):

Domestic

Means of compliance:  Part 1 of AS/NZS 3000  Part 2 of AS/NZS 3000

Additional Standards or electrical code of practice were required:  No  Yes (specify):

Date or range of dates that prescribed electrical work undertaken:

Contains fittings that are safe to connect to a power supply?  Yes  No

Specify type of supply system:

The installation has an earthing system that is correctly rated (where applicable)  Yes  No

Parts of the installation to which this certificate relates that are safe to connect to a power supply?

All  Parts (specify)

The work relies on manufacturers instructions:  Yes  No

If yes – identify the instruction manual including name, date and version. Also attach a copy of manufacturer’s instructions to this certificate. (Or provide reference to readily accessible electronic format, eg Internet link.)

Identify:   
Link:

The work has been done in accordance with a certified design:  Yes  No

If yes – identify the certified design including name, date and version. Also attach a copy of the certified design to this certificate. (Or provide reference to readily accessible electronic format, eg Internet link.)

Identify:   
Link:

The work relies on a Supplier Declaration of Conformity (SDoC):  Yes  No

If yes - identify the SDoC including name, date and version OR EESS registration. Also attach a copy of the SDoC to this certificate. (Or provide reference to readily accessible electronic format, eg Internet link.)

Identify:   
Link:

The installation has been satisfactorily tested in accordance with the Electricity (Safety) Regulations 2010  No  Yes

Description of Work: 63a single phase - new 2 Bed house wiring (whole installation)  rcd protected power and lighting circuits	Test Results (provide values)	
	Polarity (Independent earth):	
	Insulation resistance:	Ohms
	Earth Continuity:	Ohms
	Bonding:	Ohms
	Fault Loop impedance	Ohms
	Other (specify):	

By signing this document I certify that the completed prescribed electrical work to which this Certificate of Compliance applies has been done lawfully and safely, and the information in the certificate is correct.

Certifier’s signature:  Date:

## Electrical Safety Certificate

By signing this document I certify that the installation, or part of the installation, to which this Electrical Safety Certificate applies is connected to a power supply and is safe to use.

Certifier’s name:  Registration/Practising licence number:

Certifier’s signature:  Certificate Issue Date:  Connection Date:

CUSTOMER COPY – THIS IS AN IMPORTANT DOCUMENT AND SHOULD BE RETAINED FOR A MINIMUM OF 7 YEARS

# Memorandum from licensed building practitioner: Record of building work

## Section 88, Building Act 2004

Please fill in the form as fully and correctly as possible.

If there is insufficient room on the form for requested details, please continue on another sheet and attach the additional sheet(s) to this form.

### THE BUILDING

Street address: **191 Marshlands Road**

Suburb: **Cashmere**

Town/City: **Christchurch**

Postcode:

### THE PROJECT

Building consent number: **BCN/2023/5097**

### THE OWNER(S)

Name(s): **Scott Mcilraith , Daddy pig properties**

Mailing address:

Suburb:

PO Box/Private Bag:

Town/City:

Postcode:

Phone number:

Email address:

## RECORD OF WORK THAT IS RESTRICTED BUILDING WORK

### PRIMARY STRUCTURE

Work that is restricted building work	Description of restricted building work	Carried out or supervised
Tick <input checked="" type="checkbox"/>	If necessary, describe the restricted building work.	Tick <input checked="" type="checkbox"/> whether you carried out the restricted building work or supervised someone else carrying out the restricted building work.
Foundations and subfloor framing <input type="checkbox"/>	<b>Block foundation extension</b>	<input type="radio"/> Carried out <input type="radio"/> Supervised
Walls <input type="checkbox"/>	<b>Brick cladding on house</b>	<input checked="" type="radio"/> Carried out <input checked="" type="radio"/> Supervised
Roof <input type="checkbox"/>		<input type="radio"/> Carried out <input type="radio"/> Supervised
Columns and beams <input type="checkbox"/>		<input type="radio"/> Carried out <input type="radio"/> Supervised
Bracing <input type="checkbox"/>		<input type="radio"/> Carried out <input type="radio"/> Supervised
Other <input type="checkbox"/>		<input type="radio"/> Carried out <input type="radio"/> Supervised

## EXTERNAL MOISTURE MANAGEMENT SYSTEMS

Work that is restricted building work	Description of restricted building work	Carried out or supervised
Tick <input checked="" type="checkbox"/>	If necessary, describe the restricted building work.	Tick <input checked="" type="checkbox"/> whether you carried out the restricted building work or supervised someone else carrying out the restricted building work.
Damp proofing <input type="checkbox"/>		<input type="radio"/> Carried out <input type="radio"/> Supervised
Roof cladding or roof cladding system <input type="checkbox"/>		<input type="radio"/> Carried out <input type="radio"/> Supervised
Ventilation system (for example, subfloor or cavity) <input type="checkbox"/>		<input type="radio"/> Carried out <input type="radio"/> Supervised
Wall cladding or wall cladding system <input type="checkbox"/>		<input type="radio"/> Carried out <input type="radio"/> Supervised
Waterproofing <input type="checkbox"/>		<input type="radio"/> Carried out <input type="radio"/> Supervised
Other <input type="checkbox"/>		<input type="radio"/> Carried out <input type="radio"/> Supervised

## ISSUED BY

Name and contact details of the licensed building practitioner who is licensed to carry out or supervise restricted building work.

Name: **Yan Dimitrov**

LBP number: **BP126120**

Class(es) licensed in:

Plumbers, Gasfitters and Drainlayers registration number (if applicable):

Mailing address (if different from below):

Street address/Registered office: **34Pegasus Ave.**

Suburb: **North New Brighton**

Town/City: **Christchurch**

PO Box/Private Bag

Postcode: **8031**

Phone number:

Mobile: **0276661703**

After hours:

Fax:

Email address: **yan.cornerstone@gmail.com**

Website:

## DECLARATION

I Yanislav Dimitrov carried out or supervised the restricted building work recorded on this form.

Signature: \_\_\_\_\_



Date: \_\_\_\_\_

# Form 6A

## Memorandum from licensed building practitioner: Record of building work

### Section 88, Building Act 2004

Please fill in the form as fully and correctly as possible.

If there is insufficient room on the form for requested details, please continue on another sheet and attach the additional sheet(s) to this form.

#### THE BUILDING

Street address: **191 Marshlands rd**

Suburb: **shirley**

Town/City: **Christchurch**

Postcode:

#### THE PROJECT

Building consent number: **BCN/2023/5097**

#### THE OWNER(S)

Name(s): **Daddy pig properties**

Mailing address: **191 marshlands rd**

Suburb: **shirley**

PO Box/Private Bag:

Town/City: **christchurch**

Postcode:

Phone number:

Email address: **dpignz@gmail.com**

## RECORD OF WORK THAT IS RESTRICTED BUILDING WORK

### PRIMARY STRUCTURE

Work that is restricted building work	Description of restricted building work	Carried out or supervised
Tick <input checked="" type="checkbox"/>	If necessary, describe the restricted building work.	Tick <input checked="" type="checkbox"/> whether you carried out the restricted building work or supervised someone else carrying out the restricted building work.
Foundations and subfloor framing <input type="checkbox"/>		<input type="radio"/> Carried out <input type="radio"/> Supervised
Walls <input checked="" type="checkbox"/>	Stood frames and trusses	<input checked="" type="checkbox"/> Carried out <input checked="" type="checkbox"/> Supervised
Roof <input type="checkbox"/>		<input type="radio"/> Carried out <input type="radio"/> Supervised
Columns and beams <input type="checkbox"/>		<input type="radio"/> Carried out <input type="radio"/> Supervised
Bracing <input checked="" type="checkbox"/>	Hold down fixings	<input checked="" type="checkbox"/> Carried out <input checked="" type="checkbox"/> Supervised
Other <input checked="" type="checkbox"/>	Gib barrierline wall	<input checked="" type="checkbox"/> Carried out <input checked="" type="checkbox"/> Supervised

## EXTERNAL MOISTURE MANAGEMENT SYSTEMS

Work that is restricted building work	Description of restricted building work	Carried out or supervised
Tick <input checked="" type="checkbox"/>	If necessary, describe the restricted building work.	Tick <input checked="" type="checkbox"/> whether you carried out the restricted building work or supervised someone else carrying out the restricted building work.
Damp proofing <input type="checkbox"/>		<input type="radio"/> Carried out <input type="radio"/> Supervised
Roof cladding or roof cladding system <input type="checkbox"/>		<input type="radio"/> Carried out <input type="radio"/> Supervised
Ventilation system (for example, subfloor or cavity) <input type="checkbox"/>		<input type="radio"/> Carried out <input type="radio"/> Supervised
Wall cladding or wall cladding system <input type="checkbox"/>		<input type="radio"/> Carried out <input type="radio"/> Supervised
Waterproofing <input type="checkbox"/>		<input type="radio"/> Carried out <input type="radio"/> Supervised
Other <input checked="" type="checkbox"/>		<input type="radio"/> Carried out <input type="radio"/> Supervised

## ISSUED BY

Name and contact details of the licensed building practitioner who is licensed to carry out or supervise restricted building work.

Name: **Thomas wilson**

LBP number: **bp130906**

Class(es) licensed in:

**Carpentry**

Plumbers, Gasfitters and Drainlayers registration number (if applicable):

Mailing address (if different from below):

Street address/Registered office: **2 beamsgate rd**

Suburb: **halswell**

Town/City: **Christchurch**

PO Box/Private Bag

Postcode:

Phone number: **0277497575**

Mobile:

After hours:

Fax:

Email address: **tom@tgbuild.co.nz**

Website:

## DECLARATION

I **Tom Wilson** carried out or supervised the restricted building work recorded on this form.

Signature: *Tom Wilson*

Date: **19/8/2024**



**LICENSED  
BUILDING  
PRACTITIONERS**  
Building confidence

# MEMORANDUM FROM LICENSED BUILDING PRACTITIONER: RECORD OF BUILDING WORK

## Section 88, Building Act 2004

Please fill in the form as fully and correctly as possible.

If there is insufficient room on the form for requested details, please continue on another sheet and attach the additional sheet(s) to this form.

### THE BUILDING

Street address: 191 Marshlands Road

Suburb:

Town/city: Christchurch

Postcode:

### THE PROJECT

Building consent number:

2 0 2 3 / 5 0 9 7

### THE OWNERS

Name(s):

Mailing address:

Suburb:

PO Box/Private Bag:

Town/City:

Postcode:

Phone:

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Email address:



MINISTRY OF BUSINESS,  
INNOVATION & EMPLOYMENT  
HĪKINA WHAKATUTUKI

Te Kāwanatanga o Aotearoa  
New Zealand Government

# RECORD OF WORK THAT IS RESTRICTED BUILDING WORK

## PRIMARY STRUCTURE:

Work that is restricted building work	Description of restricted building work	Carried out or supervised
Tick	If necessary, describe the restricted building work	Tick whether you carried out the restricted building work or supervised someone else carrying out the restricted building work
<input checked="" type="checkbox"/> Foundations and subfloor framing	85mm Concrete Slab on raft, SE62 mesh, 300mm Polystyrene pods	<input type="checkbox"/> Carried out <input checked="" type="checkbox"/> Supervised
<input type="checkbox"/> Walls		<input type="checkbox"/> Carried out <input type="checkbox"/> Supervised
<input type="checkbox"/> Roof		<input type="checkbox"/> Carried out <input type="checkbox"/> Supervised
<input type="checkbox"/> Columns and beams		<input type="checkbox"/> Carried out <input type="checkbox"/> Supervised
<input type="checkbox"/> Bracing		<input type="checkbox"/> Carried out <input type="checkbox"/> Supervised
<input type="checkbox"/> Other		<input type="checkbox"/> Carried out <input type="checkbox"/> Supervised

**EXTERNAL MOISTURE MANAGEMENT SYSTEMS:**

Work that is restricted building work	Description of restricted building work	Carried out or supervised
Tick	If necessary, describe the restricted building work	Tick whether you carried out the restricted building work or supervised someone else carrying out the restricted building work
<input checked="" type="checkbox"/> Damp proofing	lay and taped underfloor polythene as per plan	<input type="checkbox"/> Carried out <input checked="" type="checkbox"/> Supervised
<input type="checkbox"/> Roof cladding or roof cladding system		<input type="checkbox"/> Carried out <input type="checkbox"/> Supervised
<input type="checkbox"/> Ventilation system (for example, subfloor or cavity)		<input type="checkbox"/> Carried out <input type="checkbox"/> Supervised
<input type="checkbox"/> Wall cladding or wall cladding system		<input type="checkbox"/> Carried out <input type="checkbox"/> Supervised
<input type="checkbox"/> Exterior joinery (windows and doors)		<input type="checkbox"/> Carried out <input type="checkbox"/> Supervised
<input type="checkbox"/> Waterproofing		<input type="checkbox"/> Carried out <input type="checkbox"/> Supervised
<input type="checkbox"/> Other		<input type="checkbox"/> Carried out <input type="checkbox"/> Supervised

## ISSUED BY

I am providing my contact details as a licensed building practitioner who is licensed to carry out or supervise work that is restricted building work.

Name: **Hayden Vessey**

LBP or Registration number: **101628**

Class(es) licensed in: **Carpentry**

Plumbers, Gasfitters and Drainlayers registration number (if applicable):

Mailing address (if different from below):

Street address/Registered office: **7 Lawry Place**

Suburb: **Prebbleton**

Town/City: **Christchurch**

PO Box/Private Bag:

Postcode:

Phone:

Mobile:

After hours:

Fax:

Email address: **hayden@boxitfoundations.co.nz** Website:

## DECLARATION

I, **Hayden Paul Vessey** carried out or supervised the restricted building work recorded on this form.

Applicant's signature 

Date   /   /    
day month year

Consenting & Compliance Group  
**Construction Statement –**

Water supply system & above ground sanitary plumbing pipework testing

Send this Statement to:

Inspections Team, Consenting & Compliance Group, Christchurch City Council, PO Box 73013, Christchurch 8154, or fax (03) 941 5033, or email to: [codecompliance@ccc.govt.nz](mailto:codecompliance@ccc.govt.nz).

**TO: Christchurch City Council Building Consent Authority**

Issued by: *(name of certifying plumber, holding a current licence)*

Andrew Hunter

In respect of Building Consent Number:      At: *(project address)*

2023/5097

191 Marshlands Rd

Made by: *(building consent applicant)*

Daddy Pig Properties Ltd

In relation to: *(description of work)*

New build water and waste pipework for 2 X units.

**Water supply system**

I have been engaged to undertake the plumbing work on the above approved building consent. I hereby certify that the work complies with the building consent and the NZ Building Code, and I have undertaken a pressure test for water tightness in accordance with:

- NZBC G12/AS1 7.5.1 (a),(b): By pressurising the pipework to 1500 kpa for a period of not less than 15 minutes for the hot and cold water supply and checking to see that there are no leaks; or
- NZBC G12/AS1 7.5.2, NZS 7643 section 9: By pressurising the upvc. pipework to 1.5 times the maximum working pressure for a period of not less than 15 minutes and checking that there are no leaks; or
- NZBC G12 VM1, AS/NZS 3500.1:2003: By pressurising the pipework to 1500 kpa for a period of not less than 30 minutes and checking to see that there are no leaks; or
- By working pressure (only acceptable for solid/liquid fuel heater wet back connections and solar hot water systems pipework) for a period of not less than 15 minutes and checking that there are no leaks.

For sanitary fixtures used for personal hygiene, I confirm that the anti-scald device has been set so as to not exceed:

- 45°C for early childhood centres, schools, old people's homes, institutions for people with psychiatric or physical disabilities, hospitals. (G12/ASI 6.14.1(a)); or
- 55°C for all other *buildings*. (G12/ASI 6.14.1(b))

For hot water supply systems, I confirm the required measures to prevent the growth of Legionella bacteria:

- Hot water supply system has been tested and set in accordance with G12/AS1 6.14.3; or

<input type="checkbox"/>	Ancillary heating system (solar/heat pump) have been installed and tested in accordance with G12/AS2 3.5.1 ((a), (b) or (c)); <b>or</b>
<input type="checkbox"/>	Chlorine disinfection, UV sterilization or high temperature system as consented to circulating systems.

And I believe on reasonable grounds that the pipework has passed that test.

<input checked="" type="checkbox"/>	All work complies with the NZBC
<input type="checkbox"/>	Building is connected to a site specific allocated water meter
<input type="checkbox"/>	Water meter serial number is:

### Above ground sanitary plumbing pipework

<input type="checkbox"/>	Not applicable as the building work does not include above ground sanitary plumbing pipework
--------------------------	--

All above ground sanitary plumbing pipework has been tested to verify that the system is watertight.

<input checked="" type="checkbox"/>	By a water test in accordance with either clause 7.3 of AS/NZS 2032 or clause 15.2 of AS/NZS 3500.2
<input type="checkbox"/>	By an air test carried in accordance with either clause 15.3 of AS/NZS 3500.2 or paragraph 8.3 of E1/VM1
<input type="checkbox"/>	By a vacuum test in accordance with clause 15.4 of AS/NZS 3500.2

### Certifying Plumber's Details

Name:

Andrew Hunter

Registration number:

18060

Qualifications:

Certifying Plumber

Address:

PO BOX 33508, Barrington, Christchurch

Phone numbers:

<i>work</i>	<i>mobile</i>	<i>home</i>	<i>fax</i>
0212686282			

Email:

admin@hunterplumbing.co.nz

I hereby state that the work prescribed in this consent application has been carried out by me or my employee and that the employee holds:

(select one)

<input checked="" type="checkbox"/>	A current licence under part 2, subpart 1 of the Plumbers Gasfitters and Drainlayers Act 2006; <b>or</b>
<input type="checkbox"/>	Is an exempt trainee under Section 13 of the Plumbers Gasfitters and Drainlayers Act 2006 and the work done by that trainee is carried out in accordance with a limited certificate issued by the Board to the trainee under section 14 of the Act.

I also understand that the Christchurch City Council in accepting this construction statement may be relying on it to issue the code compliance certificate at the completion of the building work.

Signature of Certifying Plumber:

Date:

A handwritten signature in blue ink, consisting of several overlapping loops and a long horizontal stroke extending to the right.

20/08/2024

# Memorandum from licensed building practitioner: Record of building work

Section 88, Building Act 2004

Please fill in the form as fully and correctly as possible.

If there is insufficient room on the form for requested details, please continue on another page and attach the additional sheet(s) to this form.

THE BUILDING	
Street address of building:	191 Marshland Road, Shirley, Christchurch

THE PROJECT	
Building consent number:	BCN2023/5097

THE OWNER(S)	
Name(s):	T&G Building Services Limited
Mailing address:	
Phone number:	
Email address:	

RECORD OF WORK THAT IS RESTRICTED BUILDING WORK		
Work that is restricted building work	Description	Carried out or supervised
Tick <input checked="" type="checkbox"/>	If necessary, describe the restricted building work	Tick <input checked="" type="checkbox"/> whether you carried out the restricted building work or supervised someone else carrying out the restricted building work
PRIMARY STRUCTURE		
Roof <input type="checkbox"/>		<input type="checkbox"/> Carried out <input type="checkbox"/> Supervised
Other <input type="checkbox"/>		<input type="checkbox"/> Carried out <input type="checkbox"/> Supervised
EXTERNAL MOISTURE MANAGEMENT SYSTEMS		
Roof cladding <input checked="" type="checkbox"/>	Installed all long run Roofing & Flashings. No Roof penetrations	<input checked="" type="checkbox"/> Carried out <input type="checkbox"/> Supervised
Wall cladding <input type="checkbox"/>		<input type="checkbox"/> Carried out <input type="checkbox"/> Supervised
Waterproofing <input type="checkbox"/>		<input type="checkbox"/> Carried out <input type="checkbox"/> Supervised
Other <input type="checkbox"/>		<input type="checkbox"/> Carried out <input type="checkbox"/> Supervised

**ISSUED BY**

Name and contact details of the licensed building practitioner who is licensed to carry out or supervise restricted building work

Name: Peter Reid LBP number: 102419

Class(es) licensed in: R2

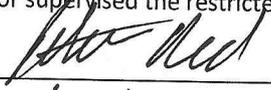
Mailing address (if different from below):

Street address / Registered office: 4 Kohuhu Ln Burwood chch

Phone number Landline: Mobile: 021505810  
Daytime: After hours:

Email address: nailedroofing@xtra.co.nz Website:

**DECLARATION**

I, Peter Reid, [name of practitioner]  
carried out or supervised the restricted building work recorded on this form.  
Signature:   
Date: 9/5/24

# PRODUCER STATEMENT – PS4 CONSTRUCTION REVIEW



association of  
consulting and  
engineering



<b>BUILDING CODE CLAUSE(S):</b>	B1	<b>JOB NUMBER:</b>	14815
<b>ISSUED BY:</b> <i>(Construction Monitoring Firm)</i>	CONSTRUCTURE CHRISTCHURCH LIMITED		
<b>TO:</b> <i>(Owner/Developer)</i>	C/O DADDY PIG PROPERTIES LTD		
<b>TO BE SUPPLIED TO:</b> <i>(Building Consent Authority)</i>	CHRISTCHURCH CITY COUNCIL		
<b>IN RESPECT OF:</b> <i>(Description of Building Work)</i>	NEW DWELLING		
<b>AT:</b> <i>(Address, Town/City)</i>	191 MARSHLAND ROAD, SHIRLEY, CHRISTCHURCH		
<b>LEGAL DESCRIPTION:</b>	Lot: 9 DP: 16288	N/A <input type="checkbox"/>	

We have been engaged by the owner/developer referred to above to provide **CM3** level of construction monitoring relating to the Clause(s) named above of the Building Code for the building work which is covered by PS1(s) issued by Refer attached schedule for details *(Engineering Design Firm)* and which is described in the documents relating to the Building Consent No. BCN/2023/5097 and those relating to Building Consent Amendment(s) No. issued during the course of the works.

We have sighted these Building Consents and the conditions attached to them.

Authorised instructions/variation(s) detailed/listed in the Schedule have been issued during the course of the works.

On the basis of these review(s) and information supplied by the contractor during the course of the works and **on behalf of the engineering firm** undertaking this Construction Monitoring, I believe on reasonable grounds that the building works covered by the above-mentioned PS1(s) have been completed in accordance with the relevant requirements of the Building Consent and Building Consent Amendments identified above or in the Schedule on page 2, with respect to Clause(s) B1 of the Building Code. I also believe on reasonable grounds that the persons who have undertaken this construction review have the necessary competency to do so.

I, *(Name of Engineering Design Professional)* Cory Bedford, am:  
•  CPEng number 238134  
and hold the following qualifications BE(Hons), CMEngNZ, CPEng IntPE(NZ)

The Engineering Design Firm holds a current policy of Professional Indemnity Insurance no less than \$200,000 The Engineering Design Firm is A member of ACE New Zealand.

**SIGNED BY** *(Name of Construction Monitoring Professional)* Cory Bedford  
*(Signature below):*

**ON BEHALF OF** *(Engineering Design Firm)* CONSTRUCTURE CHRISTCHURCH LIMITED Date: 10/04/2024

**Note:** This statement has been prepared solely for the Building Consent Authority named above and shall not be relied upon by any other person or entity. Any liability in relation to this statement accrues to the Construction Monitoring Firm only. As a condition of reliance on this statement, the Building Consent Authority accepts that the total maximum amount of liability of any kind arising from this statement and all other statements provided to the Building Consent Authority in relation to this building work, whether in tort or otherwise, is limited to the sum of \$200,000.

This form is to accompany **Forms 6 or 8 of the Building (Forms) Regulations 2004** for the issue of a Code Compliance Certificate.

## SCHEDULE to PS4

Please include an itemised list of all referenced documents, drawings, or other supporting materials in relation to this producer statement below:

### **Building work covered by PS4**

The building work undertaken was covered by a PS1 issued by Constructure Christchurch Limited. The following elements of that work are covered by this PS4:

- **Fibre reinforced concrete waffle foundation slab only.**

### **Authorised instructions/variations issued during the course of the works**

Site notes/instructions:

- SI01/A
- SI02/A

Foundation excavations inspected by geotechnical engineer. Refer PS4 from GeoConsult dated 09/04/2024

## GUIDANCE ON USE OF PRODUCER STATEMENTS

Information on the use of Producer Statements and Construction Monitoring Guidelines can be found on the Engineering New Zealand website

<https://www.engineeringnz.org/engineer-tools/engineering-documents/producer-statements/>

Producer statements were first introduced with the Building Act 1991. The producer statements were developed by a combined task committee consisting of members of the New Zealand Institute of Architects (NZIA), Institution of Professional Engineers New Zealand (now Engineering New Zealand), Association of Consulting and Engineering New Zealand (ACE NZ) in consultation with the Building Officials Institute of New Zealand (BOINZ). The original suite of producer statements has been revised at the date of this form to ensure standard use within the industry.

The producer statement system is intended to provide Building Consent Authorities (BCAs) with part of the reasonable grounds necessary for the issue of a Building Consent or a Code Compliance Certificate, without necessarily having to duplicate review of design or construction monitoring undertaken by others.

**PS1 DESIGN** Intended for use by a suitably qualified independent engineering design professional in circumstances where the BCA accepts a producer statement for establishing reasonable grounds to issue a Building Consent;

**PS2 DESIGN REVIEW** Intended for use by a suitably qualified independent engineering design review professional where the BCA accepts an independent design professional's review as the basis for establishing reasonable grounds to issue a Building Consent;

**PS3 CONSTRUCTION** Forms commonly used as a certificate of completion of building work are Schedule 6 of NZS 3910:2013 or Schedules E1/E2 of NZIA's SCC 2011<sup>2</sup>

**PS4 CONSTRUCTION REVIEW** Intended for use by a suitably qualified independent engineering construction monitoring professional who either undertakes or supervises construction monitoring of the building works where the BCA requests a producer statement prior to issuing a Code Compliance Certificate.

This must be accompanied by a statement of completion of building work (Schedule 6).

The following guidelines are provided by ACE New Zealand and Engineering New Zealand to interpret the Producer Statement.

### Competence of Engineering Professional

This statement is made by an engineering firm that has undertaken a contract of services for the services named, and is signed by a person authorised by that firm to verify the processes within the firm and competence of its personnel.

The person signing the Producer Statement on behalf of the engineering firm will have a professional qualification and proven current competence through registration on a national competence-based register such as a Chartered Professional Engineer (CPEng).

Membership of a professional body, such as Engineering New Zealand provides additional assurance of the designer's standing within the profession. If the engineering firm is a member of ACE New Zealand, this provides additional assurance about the standing of the firm.

Persons or firms meeting these criteria satisfy the term "suitably qualified independent engineering professional".

### Professional Indemnity Insurance

As part of membership requirements, ACE New Zealand requires all member firms to hold Professional Indemnity Insurance to a minimum level.

The PI Insurance minimum stated on the front of this form reflects standard practice for the relationship between the BCA and the engineering firm.

### Professional Services during Construction Phase

There are several levels of service that an engineering firm may provide during the construction phase of a project (CM1-CM5 for engineers<sup>3</sup>). The building Consent Authority is encouraged to require that the service to be provided by the engineering firm is appropriate for the project concerned.

### Requirement to provide Producer Statement PS4

Building Consent Authorities should ensure that the applicant is aware of any requirement for producer statements for the construction phase of building work at the time the building consent is issued as no design professional should be expected to provide a producer statement unless such a requirement forms part of the Design Firm's engagement.

### Refer Also:

- <sup>1</sup> Conditions of Contract for Building & Civil Engineering Construction NZS 3910: 2013
- <sup>2</sup> NZIA Standard Conditions of Contract SCC 2011
- <sup>3</sup> Guideline on the Briefing & Engagement for Consulting Engineering Services (ACE New Zealand/Engineering New Zealand 2004)
- <sup>4</sup> PN01 Guidelines on Producer Statements

[www.acenz.org.nz](http://www.acenz.org.nz)

[www.engineeringnz.org](http://www.engineeringnz.org)

Date 14.03.2024

Job # 14815

By John Fyfe

Inspection # 01 / A

Project

191 Marshlands Rd

## Constructure

Progress Sub grade inspection  
Contractors on site

### Comments

Scala penetrometer tests.  
results mostly 200 kpa ultimate being throughout  
Several section of Top soil, Rubbish  
or soft section to be removed down to  
good ground even though rubbish could be  
more

All Discuss on site

A/ reinspection completed 15.03.2024  
Scala Dropped 1m low blow  
contact geotech engineer

John

### Actions

See above  
clear photos to john@constructure.co.nz  
or in book.

### Copies to

Digger Driver.

Date 02.04.2024

Job # 14815

By John Fropull.

Inspection # 02/4

Project

191 Marshlands RD  
Shirley.

## Constructure

Progress P2 Pour Tc2 waffle foundation slabs.  
Being by others.  
BCN 2023 / 5097

Comments

HD16 Top & HD12 bottom bars correct  
mesh is set with 3m HD16 straight bars top of ribs.  
mesh reconnection bars correct  
plumber to lower waste pipes out of 45mm slab  
and to move out spray foam.  
remove all poly offcuts & Debris

A) re inspection completed 04.04.2024  
items adjusted  
ok to proceed  
J.F.

Actions

see above.

Copies to

Jr. / s, to box.

Contact

03 365 3243 / chch@constructure.co.nz

Consenting & Compliance Group

# Producer statement construction (PS3)

All sections of this PS3 must be completed

Tick applicable Contractor for:

- Building
- Waterproof Membranes
- Mechanical (HVAC)
- Emergency Lighting
- Drainlayer
- Solar Heating
- Cladding
- Fire Alarm
- Other (specify): \_\_\_\_\_
- Escalator
- Lift

Author name:

Craig Stewart

Author company:

Pro Drainage Ltd

Site address:

191 Marshlands Rd

Description of building work:

Sewer and Stormwater to boundary

Owners Details:

Daddy Pig Properties Limited

Scope of work covered by statement:

Drainlaying

System/Product used (if applicable):

PVC/G13

I (constructor):

Pro Drainage Ltd have been engaged by TG Building Services (applicant, designer, main contractor etc)  part  all to construct:

As specified in the attached particulars of Building Consent Number: BCN/2023/5097 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]*

- B1  B2  C1  C2  C3  C4  C5  C6  D1  D2  E1  E2
- E3  F1  F2  F3  F4  F5  F6  F7  F8  G1  G2  G3
- G4  G5  G6  G7  G8  G9  G10  G11  G12  G13  G14  G15
- H1

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:  Or  N/A

24916

Qualifications/Experience:

Certifying Drainlayer

Address:

P O Box 76039, Northwood

Postcode:

8051

Phone:

0800 22 00 70

Fax:

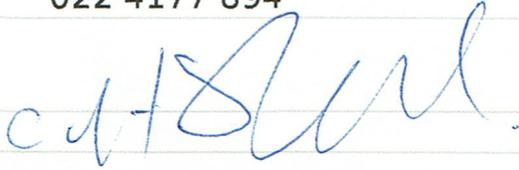
Mobile:

022 4177 894

Email:

info@prodrainage.co.nz

Signature:



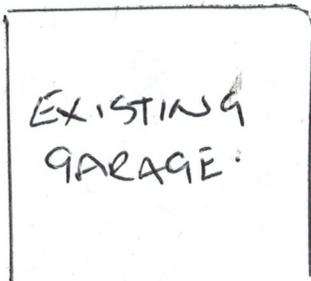
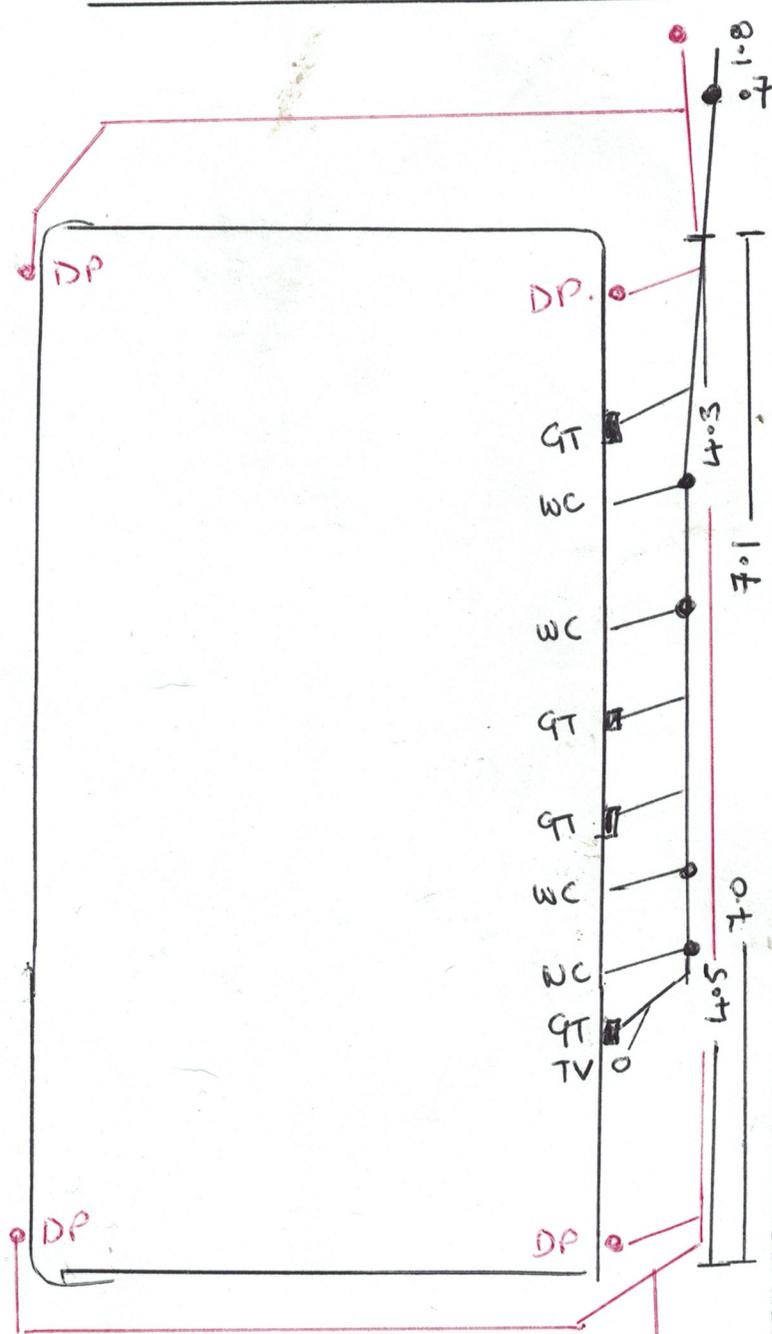
Date:

26/08/24

191 MARSHLANDS RD.  
BCN/2023/5097  
C. Stewart. 24916

SEWER 1:60  
SW 1:100

MARSHLANDS RD.





PRODUCER STATEMENT – PS4  
CONSTRUCTION REVIEW

BUILDING CODE CLAUSE(S): B1/VM4

JOB NUMBER: CQ045

ISSUED BY: Geoconsult  
(Construction Monitoring Firm)

TO: T & G Building Services  
(Owner/Developer)

TO BE SUPPLIED TO: Christchurch City Council  
(Building Consent Authority)

IN RESPECT OF: Subgrade preparation and hardfill compaction  
(Description of Building Work)

AT: 191 Marshland Road, Christchurch  
(Address, Town/City)

LEGAL DESCRIPTION: N/A

We have been engaged by the owner/developer referred to above to provide CM 2  level of construction monitoring relating to the Clause(s) named above of the Building Code for the building work which is covered by PS1(s) issued by N/A (Engineering Design Firm) and which is described in the documents relating to the Building Consent No. BCN/2023/5097 and those relating to Building Consent Amendment(s) No. issued during the course of the works, .

We have sighted these Building Consents and the conditions attached to them.  
If any of the fields above are too small, please write "refer the Schedule".

Authorised instructions/variation(s) detailed/listed in the Schedule have been issued during the course of the works.

On the basis of these review(s) and information supplied by the contractor during the course of the works and on behalf of the engineering firm undertaking this Construction Monitoring, I believe on reasonable grounds that the building works covered by the above-mentioned PS1(s) have been completed in accordance with the relevant requirements of the Building Consent and Building Consent Amendments identified above or in the Schedule on page 2, with respect to Clause(s) B1/VM4 of the Building Code. I also believe on reasonable grounds that the persons who have undertaken this construction review have the necessary competency to do so.

I, (Name of Construction Monitoring Professional) Philip Walter Matthew Williams, am:  
• CPEng number 8670  
• I hold the following qualifications BE ME CMEngNZ CPEng IntPE

The Construction Monitoring Firm holds a current policy of Professional Indemnity Insurance no less than \$200,000 The Construction Monitoring Firm Is not a member of ACE New Zealand.

SIGNED BY (Name of Construction Monitoring Professional): Philip Walter Matthew Williams  
(Signature below):

ON BEHALF OF (Construction Monitoring Firm): Geoconsult Date: 9/4/24

Note: This statement has been prepared solely for the Building Consent Authority named above and shall not be relied upon by any other person or entity. Any liability in relation to this statement accrues to the Construction Monitoring Firm only. As a condition of reliance on this statement, the Building Consent Authority accepts that the total maximum amount of liability of any kind arising from this statement and all other statements provided to the Building Consent Authority in relation to this building work, whether in tort or otherwise, is limited to the sum of \$200,000.

This form is to accompany Forms 6 or 8 of the Building (Forms) Regulations 2004 for the issue of a Code Compliance Certificate.

THIS FORM AND ITS CONDITIONS ARE COPYRIGHT TO ACE NEW ZEALAND AND ENGINEERING NEW ZEALAND

# SCHEDULE to PS4

Please include an itemised list of all referenced documents, drawings, or other supporting materials in relation to this producer statement below: |

Site Inspections:

- 15/3/2024 - Initial Inspection
- 21/3/2024 - Subgrade Inspection
- 22/3/2024 - Compaction Inspection
- 25/3/2024 (1.30pm) - Compaction Inspection
- 25/3/2024 (5.07pm) - Compaction Inspection

# GUIDANCE ON USE OF PRODUCER STATEMENTS

Information on the use of Producer Statements and Construction Monitoring Guidelines can be found on the Engineering New Zealand website

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**PS3 CONSTRUCTION** Forms commonly used as a certificate of completion of building work are Schedule 6 of NZS 3910:2013 or Schedules E1/E2 of NZIA's SCC 2011<sup>2</sup>

**PS4 CONSTRUCTION REVIEW** Intended for use by a suitably qualified independent engineering construction monitoring professional who either undertakes or supervises construction monitoring of the building works where the BCA requests a producer statement prior to issuing a Code Compliance Certificate.

This must be accompanied by a statement of completion of building work (Schedule 6).

The following guidelines are provided by ACE New Zealand and Engineering New Zealand to interpret the Producer Statement.

### Competence of Engineering Professional

This statement is made by an engineering firm that has undertaken a contract of services for the services named, and is signed by a person authorised by that firm to verify the processes within the firm and competence of its personnel.

The person signing the Producer Statement on behalf of the engineering firm will have a professional qualification and proven current competence through registration on a national competence-based register such as a Chartered Professional Engineer (CPEng).

Membership of a professional body, such as Engineering New Zealand provides additional assurance of the designer's standing within the profession. If the engineering firm is a member of ACE New Zealand, this provides additional assurance about the standing of the firm.

Persons or firms meeting these criteria satisfy the term "suitably qualified independent engineering professional".

### Professional Indemnity Insurance

As part of membership requirements, ACE New Zealand requires all member firms to hold Professional Indemnity Insurance to a minimum level.

The PI Insurance minimum stated on the front of this form reflects standard practice for the relationship between the BCA and the engineering firm.

### Professional Services during Construction Phase

There are several levels of service that an engineering firm may provide during the construction phase of a project (CM1-CM5 for engineers<sup>3</sup>). The building Consent Authority is encouraged to require that the service to be provided by the engineering firm is appropriate for the project concerned.

### Requirement to provide Producer Statement PS4

Building Consent Authorities should ensure that the applicant is aware of any requirement for producer statements for the construction phase of building work at the time the building consent is issued as no design professional should be expected to provide a producer statement unless such a requirement forms part of the Design Firm's engagement.

### Refer Also:

- <sup>1</sup> Conditions of Contract for Building & Civil Engineering Construction NZS 3910: 2013
- <sup>2</sup> NZIA Standard Conditions of Contract SCC 2011
- <sup>3</sup> Guideline on the Briefing & Engagement for Consulting Engineering Services (ACE New Zealand/Engineering New Zealand 2004)
- <sup>4</sup> PN01 Guidelines on Producer Statements

[www.acenz.org.nz](http://www.acenz.org.nz)

[www.engineeringnz.org](http://www.engineeringnz.org)

## Declaration of Thermal Performance for Windows & Doors

Date of Issue

13/11/23

### Name, Address, and Email contact of Manufacturer / Supplier

Vistalite Canterbury

909 Halswell Junction Road, Islington, Christchurch 8042

### Project / Site Details - including Address

91 Marshland Road, Shirley, Christchurch

2 Unit Dwelling

I / We declare that the following,  1) Glazed windows & doors, **or**  
 2) Opaque doors, **or**  
 3) Skylights.

supplied by us to this Project / Site, achieve a **Construction R-value** as stated below,

**Construction R-value** = **R**  m<sup>2</sup>.K/W

*(Note – The Construction R-value shall be no less than the value specified within the Consent listed above.)*

This R-value has been determined using one of the following methods,

- 1) Selected from Table E.1.1.1, **or**  
 2) Derived using a WEERS calculator, **or**  
 3) Calculated in accordance with H1/

*(Confirm H1/AS2, VM1, or VM2)*

*(Supporting documentation for methods will be supplied on request.)*

Name

Signature

Window & Glass Association Membership No.

**TABLE E.1.1.1: Construction R-values ( $R_{Window}$ ) of selected generic vertical windows and doors**  
 Paragraph E.1.1.1 a)

Type of glazing	$U_g^{(1)}$	Spacer type <sup>(2)</sup>	Example IGU <sup>(3), (4)</sup> (Informative)	$R_{Window}$ ( $m^2 \cdot K/W$ ) for different frames			
				Aluminium frame	Thermally broken aluminium frame	uPVC frame	Timber frame
Double pane	2.63	Aluminium	Glass: Clear/Clear Gas: Air	R0.26	R0.32	R0.40	R0.44
	1.90	Aluminium	Glass: Low $E_1$ /Clear Gas: Argon	R0.30	R0.39	R0.50	R0.56
	1.60	Thermally improved	Glass: Low $E_2$ /Clear Gas: Argon	R0.33	R0.42	R0.56	R0.63
	1.30	Thermally improved	Glass: Low $E_3$ /Clear Gas: Argon	R0.35	R0.46	R0.63	R0.71
	1.10	Thermally improved	Glass: Low $E_4$ /Clear Gas: Argon	R0.37	R0.50	R0.69	R0.77
	0.90	Thermally improved	Glass: Low $E_4$ /Clear Gas: Krypton	R0.40	R0.54	R0.76	R0.85
Triple pane	1.89	Thermally improved	Glass: Clear/Clear/Clear Gas: Air		R0.38	R0.50	R0.56
	1.20	Thermally improved	Glass: Low $E_1$ /Clear/Clear Gas: Argon		R0.48	R0.66	R0.74
	1.00	Thermally improved	Glass: Low $E_3$ /Clear/Clear Gas: Argon		R0.52	R0.73	R0.81
	0.70	Thermally improved	Glass: Low $E_3$ /Low $E_3$ /Clear Gas: Argon		R0.59	R0.86	R0.95
	0.60	Thermally improved	Glass: Low $E_4$ /Low $E_4$ /Clear Gas: Argon		R0.62	R0.91	R1.01

**Notes:**

(1) Thermal transmittance of the glazing determined using BS EN 673. Where the  $U_g$ -value of the proposed glazing is different from the values included in the table,  $R_{Window}$  shall be determined based on the nearest  $U_g$ -value in the table that is greater than the  $U_g$ -value of the proposed glazing.

(2) 'Thermally improved' refers to a spacer that meets the definition of thermally improved spacer in ISO 10077-1 Annex G.

(3) The examples provided are informative descriptions only of the *insulated glazing unit (IGU)* types that might be used to deliver the nominated  $U_g$ -values. When using this table,  $R_{Window}$  shall be determined based on  $U_g$ , spacer type and frame type.

(4) The properties of each of the glass panes within the *IGU* are provided and separated by '/'. 'Clear' refers to clear float glass. 'Low  $E_1$ ', 'Low  $E_2$ ', 'Low  $E_3$ ' and 'Low  $E_4$ ' refer to glass with low emissivity coatings at different performance levels.

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**COMPUTER FREEHOLD REGISTER  
UNDER LAND TRANSFER ACT 1952**



**Search Copy**

  
R.W. Muir  
Registrar-General  
of Land

**Identifier** CB558/63  
**Land Registration District** Canterbury  
**Date Issued** 06 August 1952

**Prior References**

CB144/82

---

**Estate** Fee Simple  
**Area** 612 square metres more or less  
**Legal Description** Lot 9 Deposited Plan 16288

**Proprietors**

Daddy Pig Properties Limited

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**Interests**

Subject to covenants contained in Transfer 32338 to keep drains clear - 9.5.1890 at 2.20 pm  
11148925.3 Mortgage to Kiwibank Limited - 6.7.2018 at 12:31 pm

