Statement re provision of information here

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Building Consenting Unit

Construction Statement –

Water supply system & above ground sanitary plumbing pipework testing

Send this Statement to:

Inspections Team, Building Consenting Unit, Christchurch City Council, PO Box 73013, Christchurch 8154, or email to: codecompliance@ccc.govt.nz.

TO: Christchurch City Council Building Consent Authority

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

Tane Hubert-Bassett

In respect of Building Consent Number:

At: *(project address)*

47 Cam Road, Kaiapoi

Made by: *(building consent applicant)*

Proper Job Properties Ltd

In relation to: *(description of work)*

Whole house renovation. Full re-pipe, new bathroom, new kitchen.

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:

x	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 3500.1:2018: 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/AS1 6.14.1(a)); **or**

x	50°C for all other *buildings.* (G12/AS1 6.14.1(b))

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

x	Hot water supply system has been tested and set in accordance with G12/AS1 6.14.3; **or**
☐	Ancillary heating system (solar/heat pump) have been installed and tested in accordance with G12/AS2 3.5.1 ((a), (b) or (c)); **or**
☐	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.

x	All work complies with the NZBC	
x	Building is connected to a site specific allocated water meter	
x	Water meter serial number is:	N/A

Above ground sanitary plumbing pipework

	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.

x	By a water test in accordance with either clause 7.3 of AS/NZS 2032 or clause 15.2 of AS/NZS 3500.2
☐	By an air test carried out in accordance with either clause 15.3 of AS/NZS 3500.2 or paragraph 8.3 of E1/VM1
☐	By a vacuum test in accordance with clause 15.4 of AS/NZS 3500.2

Certifying Plumber's Details

Name:

Tane Hubert-Bassett

Registration number:

28876

Qualifications:

Certifying Plumber

Address:

11 Howe Street, New Brighton, Christchurch

Phone numbers:

work	*mobile*	*home*	*fax*
0273078697			

Email:

info@thewaterwizard.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)

x	A current licence under part 2, subpart 1 of the Plumbers Gasfitters and Drainlayers Act 2006; **or**

☐	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:
	24/07/2026

Certificate Reference ID: 12844

Electrical Certificate of Compliance and Electrical Safety Certificate

Customer Information:

Company: Proper Properties

Name:

Address:

Email:

Phone: (021) 357 290

Electrical Worker & Electrical Contractor Details

Company: David Kemp Electrical

Electrical Worker: DK

Registration / Licence No: E11055

Email contact: dke@xtra.co.nz

Mobile No: 0274 333 458

Electrical workers under supervision:

Name: Registration No:

Job Details:

Full location of installation:

44 Cam rd, Kaiapoi

The work undertaken is: ☑

☐ High-risk ☑ General ☐ Low-risk

For: ☐ The full installation ☐ Part of installation

Prescribed electrical work done in accordance with: (Y or N)

☐ A Certified Design

☑ Part 2 of AS/NZS 3000:

☐ Part 1 of AS/NZS 3000:

☐ Manufactures Instructions

☐ Additional Standards Used: *if (Y) specify*

Period of work done: *start* 15/6/26 *finish*

Description of work carried out: Installation of new S/Board, new earth electrode Pre wire for lights 13 13 x outlets

15/6/26 1 x lounge outlet live only off RCBO

ELECTRICAL CONNECTION:

(Connection is the final step in the PEW that will allow the electricity to flow in the installation or part of the installation on which other prescribed electrical work is done)

INSTALLATION IS SAFE TO CONNECT ☑

☐ All ☐ Part (or) Identify the parts of installation which are safe to connect to a power supply:

Supply system which is safe to connect ☑

☐ Single Phase MEN supply ☑ Earthing System

☐ Three Phase MEN Supply / Other: (specify)

☐ The installation has been tested as required by the Electricity Safety Regulations 2010 and amendments.

Attachments: ☒none Ⓔelectronic Ⓟpaper

☐ Record of Inspection ☐ Manufactures Instructions

☐ Certified Designs ☐ Testing Documents

☐ Supplier Declarations of Conformity

☐ Additional Work Details Other

Electronic Reference info:

TESTING

Visual ✓ Polarity ✓ Insulation Resistance >799M Ω Earth Continuity Ω Bonding Ω

Fault-loop Impedance Ω PSCC A/kA RCD's

I certify that the Prescribed Electrical Work referenced on this certificate has been done lawfully and safely and the information contained on this Certificate of Compliance is correct.

Person Issuing This Certificate: Name: D. Kemp Date of Issue: 15/6/26

Signature: Registration/Licence No: E11055

-ELECTRICAL SAFETY CERTIFICATE-

I certify the installation or part installation is connected to a POWER SUPPLY and is SAFE TO USE.

erson Who Did The Connection:

ame: Registration/Licence No Date of Connection

ignature **ESC** is for ☐ The full installation ☐ Part of installation

rson who did the connection):

py 1

This document is important and must be retained by the receiver

active ELECTRICAL SUPPLIERS LTD

COCHCBOOK:AC

RECORD OF INSPECTION (ROI) OF HIGH - RISK PRESCRIBED ELECTRICAL WORK
PURSUANT TO THE ELECTRICITY (SAFETY) REGULATIONS 2010

Reference/Record ID Number: 47 Cam

Issuer (Inspector) details:

Name of Inspector: Marcus van Magoreno
Registration #: IO6027X
Email address:
Telephone: 0274322722

Location of installation:

Location details: 47 Cam Rd Waiapoi

Location type: ☑ Domestic ☐ Non-Domestic Accommodation ☐ Industrial ☐ Commercial
☐ Educational ☐ Healthcare ☐ Miscellaneous (other)

Certifying Electrical Work and Certificate of Compliance (CoC) details:

Name of Electrical worker(s): David Kemp.
Registration #: E11055

CoC details: New Switch Board, Main Switch Main earth MEN
☐ CoC(s) attached

Certifying Electrical Work and RoI details:

What was inspected:

Visual
Main Earth
Polarity
Earth loop impedance

Specify the regulation(s) and companion standard(s), or identify the certified design, followed when carrying out the inspection:

AS NZS 3000
ESR 2010

What are the results of the inspection:

Visual good.
Main earth continuity 0.0 Ω
Polarity correct.
ELZ 0.75Ω 307PFC @ 235V

High Risk Category:

☐ Not to AS/NZS 3000 Part 2 – 6A(2)(a)(i)
☐ Photovoltaic system – 6A(2)(a)(iv)
☐ Electrical medical area – 6A(2)(a)(vi)
☐ High voltage installation – 6A(2)(a)(ii)
☐ Hazardous area – 6A(2)(a)(v)
☑ Mains work – 6A(2)(b)
☐ Mains parallel generation – 6A(2)(a)(iii)
☐ Animal stunning or meat conditioning – 6A(2)(c)
☐ Other – please describe:

Declaration

I hereby confirm that the work described above has been done in accordance with the regulations; and the installation on which the work has been done is, and will be , when enlivened, electrically safe.

Signature:
Date: 8-07-26.

Producer statement construction (PS3)

All sections of this PS3 must be completed

Tick applicable Contractor for:

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

Author name:

Zayne Puata

Author company:

RZ Builders Ltd

Site address:

47 Cam Rd

Description of building work:

Replacement of subfloor and Internal framing and lining of walls

Owners Details:

Sarah Marwick

Scope of work covered by statement:

Sub floor and Internal framing

System/Product used (if applicable):

I (constructor): Zayne Puata have been engaged by

Sarah Marwick (applicant, designer, main contractor etc) to construct: ☑ part ☐ all

As specified in the attached particulars of Building Consent Number: Text 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	☐ H1	
☐ E3	☐ F1	☐ F2	☐ F3	☐ F4	☐ F5	☐ F6	☐ F7	☐ F8	☐ G1	☐ G2	☐ G3		
☐ G4	☐ G5	☐ G6	☐ G7	☐ G8	☐ G9	☐ G10	☐ G11	☐ G12	☐ G13	☐ G14	☐ 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: 141298 Or ☐ N/A

Qualifications/Experience:

Carpentry Level 4, Licensed Building Practitioner, 13 Years Building experience

Address:	Postcode:
86 Effingham Street, North New Brighton, Christchurch	8083

Phone:	Fax:

Mobile:	Email:
021 215 9374	zaynepuata@rzbuilders.com

Signature:	Date:
	27/07/26

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: 47 Cam Road

Suburb: | Town/city: Kaiapoi | Postcode: 7630

THE PROJECT

*Building consent number: BC260376 ***or***

*Project information memorandum record number for non-consented small standalone dwelling:

*Select one

THE OWNERS

Name(s): Sarah Marwick

Mailing address: 8 The rise

Suburb: Mt Pleasant | PO Box/Private Bag:

Town/City: Christchurch | Postcode: 8081

Phone: 021351290 | Email address: sarah@properjob.co.nz

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
☑ Foundations and subfloor framing	New piles and sub floor framing to existing dwelling	☑ Carried out ☐ Supervised
☑ Walls	Framing new internal walls	☑ Carried out ☐ Supervised
☐ Roof		☐ Carried out ☐ Supervised
☑ Columns and beams	Installation of timber beam to support existing ceiling beam	☑ Carried out ☐ Supervised
☑ Bracing	Additional BI1 added	☑ Carried out ☐ Supervised
☐ Other		☐ Carried out ☐ 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
☐ Damp proofing		☐ Carried out ☐ Supervised
☐ Roof cladding or roof cladding system		☐ Carried out ☐ Supervised
☐ Ventilation system (for example, subfloor or cavity)		☐ Carried out ☐ Supervised
☐ Wall cladding or wall cladding system		☐ Carried out ☐ Supervised
☐ Waterproofing		☐ Carried out ☐ Supervised
☐ Other		☐ Carried out ☐ 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: Zayne Puata	LBP or Registration number: 141298
Class(es) licensed in: Carpentry	
Plumbers, Gasfitters and Drainlayers registration number **(if applicable)**:	
Mailing address **(if different from below)**:	
Street address/Registered office: 86 Effingham Street	
Suburb: North New Brighton	Town/City: Christchurch
PO Box/Private Bag:	Postcode: 8083
Phone:	Mobile: 021 215 9374
After hours:	Fax:
Email address: zaynepuata@rzbuilders.com	Website: rzbuilders.com

DECLARATION

I Zayne Puata carried out or supervised the restricted building work recorded on this form.

Applicant's signature  Date: 27 (DAY) 07 (MONTH) 2026 (YEAR)