

# Application for Building Consent for Swimming Pool/Safety Barrier

[Form 2] Section 33 or 45 Building Act 2004



BC Application No.:

Building Category (Office use only):

## Project Address / Building Location

Rapid/Street No.: \_\_\_\_\_ Road/Street: \_\_\_\_\_

Legal Description: Lot No \_\_\_\_\_ D.P. No \_\_\_\_\_ Val No \_\_\_\_\_ Sec No \_\_\_\_\_ Blk No \_\_\_\_\_  
of land where building is located [state legal description as at the date of application]

Blk name & No \_\_\_\_\_ ML No \_\_\_\_\_

## Details Of Owner

Please delete items not applicable

Title: (\*) Mr / Mrs / Miss / Ms ( other \_\_\_\_\_ )

Surname: \_\_\_\_\_

First Name(s): \_\_\_\_\_

Contact Person (If owner not an individual) \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Street Address/Registered Office: \_\_\_\_\_

Phone No: (Ah) \_\_\_\_\_ (Bh) \_\_\_\_\_

Mobile No: \_\_\_\_\_ Fax : \_\_\_\_\_

Email Address: \_\_\_\_\_

Website (if applicable): \_\_\_\_\_

THE FOLLOWING EVIDENCE OF OWNERSHIP IS ATTACHED TO THIS APPLICATION:  
Copy of certificate of title, lease, agreement for sale and purchase, occupation order, or other document showing full name of legal owner(s) of the land/building.

## FIRST POINT OF CONTACT

For communications with the Council:

<b>OWNER</b>	<b>AGENT</b>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

Mail documents to:

## Agent

Agent contact must be NZ address (if application made on behalf of owner)

Title: (\*) Mr / Mrs / Miss / Ms ( other \_\_\_\_\_ )

Surname: \_\_\_\_\_

First Name(s): \_\_\_\_\_

Contact Person (If agent not an individual) \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Street Address/Registered Office: \_\_\_\_\_

Phone No: (Ah) \_\_\_\_\_ Bh) \_\_\_\_\_

Mobile No: \_\_\_\_\_ Fax : \_\_\_\_\_

Email Address \_\_\_\_\_

Website (if applicable): \_\_\_\_\_

Relationship To Owner: \_\_\_\_\_

[state details of authorisation from the owner to make the application on the owner's behalf]

Owners authorisation to act as Agent:

[to be signed in lieu of authorisation letter]

or, alternatively:  authorisation letter attached

I, \_\_\_\_\_ as owner of the above property, authorise the person(s) above to act as my agent.

Signature: [of building owner(s)] \_\_\_\_\_ Date: \_\_\_\_\_

## Description of Work / Project

Pool type:  Swimming Pool  Spa Pool

Project:  Pool and barrier [indicate type]:  Above-ground,  In-ground **OR**  Existing pool – barrier only

Does the project involve land disturbance/alterations to land contours? No Yes  
[this includes any accessways, building platforms, buried tanks etc]   If yes, please provide total volume \_\_\_\_\_

Detailed description of work [if applicable]: \_\_\_\_\_  
Provide sufficient description of building work to enable scope of work to be fully understood

ESTIMATED VALUE OF BUILDING WORK (GST incl): \$ \_\_\_\_\_ INTENDED LIFE [of the building if less than 50 years]: \_\_\_\_\_ (years)  
[State estimated value as defined in section 7 of the Building Act 2004]

I request that you issue a BUILDING CONSENT for the building work described in this application

**X** \_\_\_\_\_ Date: \_\_\_\_\_  
**SIGNATURE OF OWNER / AGENT ON BEHALF OF AND WITH THE AUTHORITY OF THE OWNER**

Please complete sec 4 & 5  
**continued over leaf ...**

## Key Personnel

**DESIGNER/S** Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_ Fax: \_\_\_\_\_

**BUILDER/S** Name: \_\_\_\_\_ Registration No\*: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_ Fax: \_\_\_\_\_

**FENCE SUPPLIER** Name: \_\_\_\_\_ Registration No\*: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_ Fax: \_\_\_\_\_

**FENCE INSTALLER** Name: \_\_\_\_\_ Registration No\*: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_ Fax: \_\_\_\_\_

**CRAFTSMAN PLUMBER/REG DAINLAYER** Name: \_\_\_\_\_ Registration No\*: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_ Fax: \_\_\_\_\_

**ELECTRICIAN** Name: \_\_\_\_\_ Registration No\*: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_ Fax: \_\_\_\_\_

Section 4

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

Clause	work	Means of compliance
		Refer to relevant compliance document(s) or detail of alternative solution in the plans and specifications. Tick N/A if not applicable. If "Other" please specify.
<b>B1</b>	Structure	<input type="checkbox"/> N/A <input type="checkbox"/> B1/AS2/AS1 <input type="checkbox"/> NZS3604 <input type="checkbox"/> NZS4229 <input type="checkbox"/> NZS1170 <input type="checkbox"/> Other:
<b>B2</b>	Durability	<input type="checkbox"/> N/A <input type="checkbox"/> B2/AS1 <input type="checkbox"/> NZS3101 <input type="checkbox"/> NZS3602 <input type="checkbox"/> NZS3604 <input type="checkbox"/> Other:
<b>D1</b>	Access/slip	<input type="checkbox"/> N/A <input type="checkbox"/> D1/AS1 <input type="checkbox"/> Other:
<b>F4</b>	Safety from falling	<input type="checkbox"/> N/A <input type="checkbox"/> F4/AS1 <input type="checkbox"/> Other:
<b>F9</b>	Pool barriers/covers	<input type="checkbox"/> N/A <input type="checkbox"/> F9/AS1 <input type="checkbox"/> F9/AS2 <input type="checkbox"/> Other:
<b>G9</b>	Electricity	<input type="checkbox"/> N/A <input type="checkbox"/> G9/AS1 <input type="checkbox"/> Other:
<b>G12</b>	Water supplies	<input type="checkbox"/> N/A <input type="checkbox"/> G12/AS1 <input type="checkbox"/> AS/NZS3500.1 <input type="checkbox"/> AS/NZS3500.4 <input type="checkbox"/> Other:
<b>G13</b>	Foul water	<input type="checkbox"/> N/A <input type="checkbox"/> G13/AS1 <input type="checkbox"/> AS/NZS3500.2 <input type="checkbox"/> BS5572 <input type="checkbox"/> Other:

Section 5

TO AVOID DELAYS IN PROCESSING OF YOUR APPLICATION

**PLEASE ENSURE YOU HAVE ATTACHED/PROVIDED FOLLOWING INFORMATION:**

- CERTIFICATE OF TITLE where a certificate of title is not supplied the cost will be added to the total fee payable.
- SITE PLAN showing street/road location, distance to boundaries and buildings, natural features of the land, (i.e. hills, lakes, streams, trees etc) detail of any excavation work or site levelling and for rural areas, show location of septic tank & effluent lines.
- ONE SET OF PLANS that include pool safety barrier detail; location, height, gates, latching etc (1:100 min scale). Alternatively, if the consent application is for a safety barrier for an existing pool, photos clearly showing all details will be sufficient.
- SPECIFICATIONS and detail of compliance with Fencing of Swimming Pools Act 1987 or F9 of the NZ buiding code.
- RECEIPT for payment of deposit fee for this application.
- Please check ALL details on this form are filled out and **ENSURE YOU HAVE SIGNED at the bottom of page 1.**

Section 6

**PLEASE NOTE:**

- The pool safety barrier must be in place as soon as the pool is in the ground. It is important that the pool is not filled (or partly filled) with water until the barrier/fencing has been approved.
- The owner (and tenant) have an obligation to ensure that the pool safety barrier remains compliant at all times. Safety checks and maintenance must be carried out regularly. For further information, please ask our staff for a copy of our pool safety barrier booklet, or download a copy from our web site – [gdc.govt.nz](http://gdc.govt.nz).