



**Application For Code Compliance  
Certificate (Form 6)  
Section 92, Building Act 2004**

Form 6 application received by:		
<input type="checkbox"/> Counter	<input type="checkbox"/> Mail	<input type="checkbox"/> Fax
<input type="checkbox"/> Email	<input type="checkbox"/> In person	
Application form completed correctly:		
<input type="checkbox"/> Yes	<input type="checkbox"/> No	Initial _____ Date _____
If no, application is handed or posted back.		
Resubmitted and completed correctly:		
<input type="checkbox"/> Yes		Initial _____ Date _____
Have all inspections been undertaken:		
<input type="checkbox"/> Yes	<input type="checkbox"/> No	If no, book inspection
Inspection booked for: _____		

**The Building Consent:**

Building consent number: «Application\_Number» (and all subsequent amendments)  
Project Address: «Primary\_Prop\_Address»

Issued by: Invercargill City Council

THE OWNER:	THE AGENT:
<b>Name:</b> .....	<b>Name:</b> .....
<b>Contact Person:</b> .....	<b>Contact Person:</b> .....
<b>Mailing Address:</b>	<b>Mailing Address:</b> .....
<b>Street Address:</b>	<b>Street Address:</b>
.....	.....
<b>Ph:</b> .....	<b>Ph:</b> .....
<b>Mob:</b> .....	<b>Mob:</b> .....
<b>Fax:</b> .....	<b>Fax:</b> .....
	<b>Relationship to Owner:</b> .....

The following evidence of ownership is attached to this application: [Delete as applicable]

- I. Certificate of Title
- II. Lease Agreement
- III. Agreement for Sale and Purchase
- IV. Other document showing full name of legal owner(s) of the building
- V. Ownership details are the same as per the original building consent application

First point of contact for communications with the Invercargill City Council shall be: [Delete one]

- I. The Owner
- II. The Agent

**Application:**

All building work to be carried out under the above building consent was completed on or about:

Date:

**The personnel who carried out the building work are as follows:**

Designer	N/A <input type="checkbox"/>	Structural Engineer	N/A <input type="checkbox"/>
Name: .....		Name: .....	
Address: .....		Address: .....	
Phone: ..... Fax:.....		Phone: ..... Fax: .....	
Email:.....		Email: .....	
Registration No: (applicable 01/03/12).....			

<b>Builder</b> <span style="float: right;">N/A <input type="checkbox"/></span>	<b>Certifying Drainlayer</b> <span style="float: right;">N/A <input type="checkbox"/></span>
Name: .....	Name: .....
Address: .....	Address: .....
Phone: ..... Fax:.....	Phone: ..... Fax: .....
Email:.....	Email: .....
Registration No: (applicable 01/03/12).....	Registration No:.....
<b>Certifying Plumber</b> <span style="float: right;">N/A <input type="checkbox"/></span>	<b>Roof Cladding</b> <span style="float: right;">N/A <input type="checkbox"/></span>
Name: .....	Name: .....
Address: .....	Address: .....
Phone: ..... Fax:.....	Phone: ..... Fax: .....
Email:.....	Email: .....
Registration No:.....	Registration No: (applicable 01/03/12) .....
<b>Registered Electrician</b> <span style="float: right;">N/A <input type="checkbox"/></span>	<b>Other</b> <span style="float: right;">N/A <input type="checkbox"/></span>
Name: .....	Name: .....
Address: .....	Address: .....
Phone: ..... Fax:.....	Phone: ..... Fax: .....
Email:.....	Email: .....
Registration No:.....	Registration No: (where relevant).....

The following specified systems are contained on the compliance schedule for the building and, in the opinion of the personnel who installed them, are capable of performing to the performance standards set out in the building consent: [Delete if not applicable]

SPECIFIED SYSTEM	✓	SPECIFIED SYSTEM	✓
SS1 – Automatic Sprinkler Systems		SS10 – Building Maintenance Units	
SS2 – Emergency Warning Systems		SS11 – Laboratory Fume Cupboards	
SS3.1 – Automatic Doors and Windows		SS12.1 – Audio Loops	
SS3.2 – Access Controlled Doors		SS12.2 – FM Radio Frequency Systems	
SS3.3 – Interfaced Fire or Smoke Doors or Windows		SS13 – Mechanical Smoke Control	
SS4 – Emergency Lighting Systems		SS14.1 – Emergency Power Systems for SS1 – 13	
SS5 – Escape Routes Pressurisation Systems		SS14.2 – Signs for SS1 – 13	
SS6 – Riser Mains		SS15.1 – Systems for Communicating Evacuation	
SS7 – Auto Back-Flow Preventers		SS15.2 – Final Exits	
SS8.1 – Passenger Carrying Lifts		SS15.3 – Fire Separators	
SS8.2 – Service Lifts		SS15.4 – Signs	
SS8.3 – Escalators and Moving Walks		SS15.5 – Smoke Separations	
SS9 – Mechanical Ventilators		SS16 – Cable Cars	

I request that you issue a code compliance certificate for this work under Section 95 of the Building Act 2004.

.....  
Signature of owner or agent on behalf of and with authority of the owner

The code compliance certificate should be sent to: [Delete one]

- I. The Owner
- II. Owner's agent

.....  
Name of person signing

.....  
Date

**Attachments:** [Delete or add as applicable]

The following documents are attached to this application:

- Certificates from the personnel who carried out the work
- Certificates that relate to the energy work
- Evidence that specified systems are capable of performing to the performance standards set out in the building consent
- As built truss plans and layout
- As built drainage plan