

Application for an amendment to a compliance schedule

Section 106, Building Act 2004 (Form 11)

APPLICATION DETAILS

Compliance Schedule No:

THE BUILDING

Street address of building:

Legal description of land where building is located:

Building name:

Location of building within site/block N°:
(include nearest street access)

Level /
Unit N°:

No of occupants per level, and per use if more than 1

Current, lawfully established, use: (include number uses if >1)

THE OWNER

Name of owner: (Include preferred form of address e.g. Mr, Miss, Dr if an individual)

Contact person: (Insert n/a if the applicant is an individual)

Mailing address:

Postcode:

Street address/registered office:

Phone number: Work

After hours:

Facsimile number:

Mobile:

Email address:

Website:

The following evidence of ownership is attached to this application:

Record of Title

Sale & Purchase agreement

Lease agreement

Other document showing full name of legal owners of the building

AGENT (only required if application is being made on behalf of the owner)

Name of agent:

Contact person:

Mailing address:

Postcode:

AGENT (only required if application is being made on behalf of the owner)

Street address / registered office:			
Phone number: Work		After hours:	
Facsimile number:		Mobile:	
Email address:		Website:	
Relationship to owner: <i>(supply details of authorisation from the owner to make the application on the owner's behalf)</i>			

BILLING

All related invoices/refunds to be billed to:	Owner:		Agent:		Applicant:	
Preferred method of correspondence:			Email:		Post:	
Purchase order/Reference number: (if applicable)						

Please note: any refunds are paid to the receipted name unless written authorisation has been received from the receipted person or company stating otherwise

SIGNATORY

Owner / agent signature:		Date:	
Print name:		IQP N°: (if agent IQP)	

If you are signing this application on behalf of a company/trust/other entity (the agent), you are declaring that you are duly authorised to sign on behalf of the owner to make this application

APPLICATION

I request that the compliance schedule for the above building be amended as follows

Please attach a completed Specified system form (AC2109a) for each relevant specified system

Specified system	Amendment	State reason why amendment is required	AC2109a attached

LOCATION OF COMPLIANCE SCHEDULE

Important note: *The compliance schedule must be kept in a location agreed to between Auckland Council and the Owner.*

The compliance schedule and the written reports obtained in accordance with the compliance schedule are to be kept at:

ATTACHMENTS

Copy of existing compliance schedule

Evidence of ownership

Specified system form (AC2109a) for each relevant specified system

Email completed form to: regsupportcomplianceschedule@aucklandcouncil.govt.nz