

Drainage

checklist

DETAILS

Consent number: _____ Date: _____ Unit or level number: _____

Address: _____

Inspector's full name: _____ Who attended: _____

Weather conditions: _____ Site conditions: _____

8am 10am 1pm 3pm Time units: _____ Chargeable No charge Partial Full

Consent involves RBW Yes No N/A LBP license checked and OK for this inspection Yes No N/A

Has work been completed in accordance with approved plans? Yes No (complete section below)

VARIATIONS

N/A (denotes not applicable)

Minor variations (AC2131); inspection may proceed. Documentation received Yes No

Has form AC2131 been completed Yes No If no then inspection is failed.

Amendment; inspection may only proceed if building work does not affect this inspection. Formal amendment required.

CoW required from designer Yes No N/A RoW required from LBP Yes No N/A

Does the amendment affect this inspection? Yes No If yes, can inspection proceed? Yes No

INSPECTION RESULTS

Please tick the appropriate boxes

PASS denotes this inspection is in accordance with the building consent and building code. Work can proceed.

FAIL denotes inspection is not in accordance with the building consent and building code. Re-inspection required.

If the inspection fails, issue a site instruction and record number: _____

GENERAL

Are consented plans sighted? Yes No Is inspection for correct consent? Yes No

All previous inspections approved? Yes No Any applicable conditions/advice notes? Yes No

Any other site issues? (comments) Yes No

DOCUMENTATION

N/A

Maintenance contract required? Yes No Drains laid as per plan? Yes No

Progressive As built available? Yes No As built plans received? Yes No

Drainlayer's registration verified? Yes No

Drainlayer's name: _____ Drainlayer's registration number: _____

System used: AS/NZS 3500/G13/other: _____

Consent number: _____ Date: _____

DRAINAGE FOULWATER		<input type="checkbox"/> N/A		
PVC, clay, concrete (circle one)	<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A	Gradient	_____ %	<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A
Drain depth _____mm	<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A	Granular bedding		<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A
Inspection fittings	<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A	Drain test, air, water, smoke		<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A
ORG or Gully trap	<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A	Connection to council drain		<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A
Reflux valves	<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A	Pumps, alarm, signage		<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A
Manhole, chamber construction	<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A	Water conservation devices		<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A
Grease trap	<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A	Septic tank and effluent field		<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A
Drain vent	<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A			

DRAINAGE STORMWATER		<input type="checkbox"/> N/A		
PVC, clay, concrete (circle one)	<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A	Gradient	_____ %	<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A
Drain depth _____mm	<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A	Granular bedding		<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A
Inspection fittings	<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A	Drain test, air, water, smoke		<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A
ORG or Gully trap	<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A	Connection to council drain		<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A
Reflux valves	<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A	Pumps, alarm, signage		<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A
Manhole, chamber construction	<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A	Connection to kerb/water course		<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A
Retention or detention tanks	<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A	Sumps/silt traps with external siphons		<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A
Orifice size _____mm	<input type="checkbox"/> Pass <input type="checkbox"/> Fail <input type="checkbox"/> N/A			

COMMENTS

Specify area inspected _____

Specify items inspected _____

NEXT INSPECTION