



**APPLICATION FORM - BUILDING CONSENT EXEMPTION**  
under Building Act 2004 Schedule 1 (2)

Clutha District Council

**OWNER / APPLICANT**

*(Attach evidence of ownership to this application, and if not the owner, attach details of authorisation to lodge application on owners behalf.)*

Name : \_\_\_\_\_ Phone No : \_\_\_\_\_

Postal Address: \_\_\_\_\_ Cellphone : \_\_\_\_\_

\_\_\_\_\_ Fax: \_\_\_\_\_

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

Signature : \_\_\_\_\_ Date : \_\_\_\_\_

**BUILDING/LOCATION**

Street Address: \_\_\_\_\_  
(or Rapid Number) \_\_\_\_\_

Legal Description: \_\_\_\_\_

Year of Construction : \_\_\_\_\_ Valuation Number: \_\_\_\_\_

Current, lawfully established use: \_\_\_\_\_

**PROJECT**

*(Provide sufficient description of building works to enable scope of work to be fully understood)*

Description of building works \_\_\_\_\_ Estimated value of work (incl GST): \$ \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Provide details of any proposed new use: \_\_\_\_\_

**ATTACHMENTS**

- |                                                                 |                                              |
|-----------------------------------------------------------------|----------------------------------------------|
| <input type="checkbox"/> An application fee                     | <input type="checkbox"/> Producer Statements |
| <input type="checkbox"/> Copies of plans and specifications     | <input type="checkbox"/> Photographs         |
| <input type="checkbox"/> References to determinations / opinion | <input type="checkbox"/> Other _____         |

**DECISION** (to be completed by the Territorial Authority)

- Approved** – Building consent is not necessary because either :
- It is unlikely to be carried out otherwise than in accordance with the Building Code
- or  If carried out otherwise than in accordance with the Building Code, is unlikely to endanger people or any building, whether on the same land or on other property
- Not Approved** - A building consent is required for the above project.

**Building Control Manager:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**PLEASE NOTE :** assessment of the information provided with this application has only been made in consideration of the Building Act 2004. Additional authorisations may be required under other legislation including the Resource Management Act, Health Act, Liquor Act etc and remain the responsibility of the owner to check.