

Fees paid		Building Consent No.	
Receipt No.		Date Received	



## APPLICATION FOR INSTALLATION OF SPACE HEATER

Section 33 or 45, Building Act 2004

**Note:** Insert a tick in each applicable box, complete all items applicable to your project

Rec. By

Authentication

NO.

### THE BUILDING

Street address:  
(Project location)

Legal description:  
(at time of application)

Lot:

DP:

Proposed Lot: (if subject to new subdivision)

Valuation roll number:

Section:

Block:

Survey district:

Building name:

(Eg: Name of School, Hall, Motel etc)

Location of building within site:

Number of levels:

Level/Unit No:

(include ground level and any levels below and above ground)

Number of units

Total floor area:

(area affected by the building work)

m<sup>2</sup>

Current lawfully established use: Use on previous consent for the existing building, include number of occupants per level and per use if more than 1 (i.e. multi tenancy)

Year building first constructed:

(approximate date is acceptable e.g: c1920s or 1960-1970)

### THE OWNER

Owners name:

(include preferred form of address, eg. Mr Miss, Dr, if an individual)

Contact person

(If owner is not an individual)

Mailing address:

Post code

Street address or registered office:

Contact numbers: Landline:

Mobile:

Daytime:

After hours:

Fax:

Email address:

Website:

The following evidence of ownership is attached to this application:

Signed copy of Sale and Purchase Agreement  
(if new owner)

Copy of Lease

Other

### AGENT

(only use if application is being made for and on behalf of owner, agent will receive invoices)

Name of agent:

Contact person:

Mailing address:

Post code

Street address or registered office:

Contact numbers: Landline:

Mobile:

Daytime:

After hours:

Fax:

Email address:

Website:

Relationship to owner:

Authorisation from owner attached

### The Owner The Agent FIRST POINT OF CONTACT

Or **Other** (complete this panel)

(will receive any correspondence/requests for further information **prior** to issue of consent)

Full name:

Mailing address:

Post code

Contact numbers:

Mobile:

Fax:

Email:

Landline:

Daytime:



WOODBURNER  
Minimum documentation requirements

1. Your application will only be accepted if the information outlined in this checklist is provided.
2. Submission over the counter does not necessarily guarantee acceptance for processing.

Items To Be Checked
Completed application form
Two (2) sets of floor plans of rooms and location of doors, windows and the proposed location of the spaceheater. Include any existing open fires or spaceheaters and note if they are to be removed. Include location of existing and proposed smoke alarms.
Property ownership / Certificate of Title
Agent Authorisation
Two sets of installation instructions
Producer Statements for second hand or rebuilt heaters <i>(if applicable)</i>
Certification for second hand or rebuilt heaters (urban and rural less than 2ha) <i>(if applicable)</i>