

Office Use only	
Date received:	
Receipt number:	
Amount:	

# Application for Compliance Schedule or Compliance Schedule Amendment

Section 100 and section 106, Building Act 2004

<input type="checkbox"/>	Application for Compliance Schedule
<input type="checkbox"/>	Application for Compliance Schedule Amendment

Property Information						
Valuation number:						
Street address:						
Legal description	LOT		DP		Other	
Level/unit number:						
Maximum number of occupants:						
Currently, lawfully established use:						
Year first constructed:				Intended life of business:		
Purpose group:				Highest fire category:		

Owner			
Name:			
Contact person:		Phone number:	
Email address:		Mobile number:	
Street address/registered office:			
Mailing address: <i>(If different from the above)</i>			
Website:			

Agent (if applicable)			
Name/Company:			
Contact Person:		Phone number:	
Email address:		Mobile number:	
Street address/registered office:			

Agent information continued....	
Mailing address: <i>(If different from the above)</i>	
Website:	
Relationship to Owner: <i>(State details of authorisation from the owner to make the application on the owner's behalf)</i>	

First point of contact:	
Invoice payable by:	

Specified Systems					
Please advise of all specified systems within the building and if they are new, existing, altered or removed.					
System	Specified System	New	Existing	Altered	Removed
SS/1	Automatic systems for fire suppression (e.g. sprinkler system)				
SS/2	Automatic or manual emergency warning system for fire or other danger				
SS/3	Electromagnetic or automatic doors and windows				
SS/3.1	Automatic doors				
SS/3.2	Access controlled doors				
SS/3.3	Interfaced fire or smoke doors or windows				
SS/4	Emergency lighting systems				
SS/5	Escape route pressurisation systems				
SS/6	Riser mains for use by Fire Service				
SS/7	Automatic backflow preventers connected to a potable water supply and contained entirely/partially within boundary of building being serviced and not owned by the network utility operator				
SS/8	Lifts, escalators, travelators or other systems for moving people or goods within buildings				
SS/8.1	Passenger-carrying lifts				
SS/8.2	Service lifts				
SS/8.3	Escalators and moving walks				
SS/9	Mechanical ventilation or air conditioning systems				
SS/10	Building maintenance units				
SS/11	Laboratory fume cupboards				
SS/12	Audio loops or other assistive listening systems				
SS/12.1	Audio loops				

SS/12.2	FM radio frequency systems and infrared beam transmission systems				
SS/13	Smoke control systems				
SS/13.1	Mechanical smoke control				
SS/13.2	Natural smoke control				
SS/13.3	Smoke curtains				
SS/14	Emergency power system for, or signs relating to a system in any of Specified Systems 1-13				
SS/14.1	Emergency power systems				
SS/14.2	Signs (relating to a system listed in Specified Systems 1-13)				
SS/15	Other fire safety systems or features				
SS/15.1	Systems for communicating spoken information intended to facilitate evacuation				
SS/15.2	Final exits				
SS/15.3	Fire separations				
SS/15.4	Signs for communicating information intended to facilitate evacuation				
SS/15.5	Smoke separations				
SS/16	Cable cars attached to or servicing a building				
Please attach a <a href="#">Specified System Form</a> for any <u>new</u> or <u>altered</u> specified system					

<b>If the application is for a Compliance Schedule Amendment, please state why an amendment is required</b>

<b>Additional Information</b>
If this application relates to a Building Consent or Certificate of Acceptance application? Please list the consent number:

<b>Attachments</b>
<a href="#">Specified System forms</a> (for each <u>new</u> or <u>altered</u> system)
A copy of the exiting Compliance Schedule (if an amendment application is being made)
Evidence of ownership (If ownership has changed, a copy of record of title or lease agreement showing full name of legal owner(s) of the building is required)

**Fees and Charges**

By submitting this application, the applicant agrees to pay all reasonable costs associated with this application as outlined on our Building Assurance fees and charges listed on our website. If any steps, including the use of debt collectors and/or lawyers, are needed to recover unpaid processing costs, the applicant agrees to pay all collection costs.

**Declaration**

I understand that this application may only be made with the owner's approval.

I request that a Compliance Schedule/Compliance Schedule Amendment is issued based on the information provided on and attached to this application, which I believe to be correct.

I understand that the Compliance Schedule should be held on the premises in the Manager/Administrator's office, or at an agreed location between the Council and the Owner and it is my responsibility to nominate the location where the logbook and Building Warrant of Fitness is to be held on site.

Name:			
Signature:		Date:	