Application for Amendment to Compliance Schedule



Section 106 Building Act 2004

Send or deliver your application to: South Wairarapa District Council,

19 Kitchener Street, P O Box 6 Martinborough 5741 Phone: 06 306 9611 Fax: 06 306 9373

Council Use Only Application
Property ID

The Building
Street address of building
<u>Legal description of land where building is located</u> (state legal description as at the date of application and, if the land is proposed to be subdivided, include details of relevant lot numbers and subdivision consent)
Building Name (If applicable)
Location of building within site (include nearest street access)
<u>Level/unit No</u>
Current Lawful established use (include number of occupants per level and per use if more than 1 level)
The Owner
Name of Owner:
Mailing Address:
Contact details:
Landline:Mobile:
Daytime:After hours:
Facsimile number:Email:

Name of Agent:		
Mailing Address:		
Contact details:		
Landline:	Mobile:	
Daytime:	After hours:	
Facsimile number:	Email:	
Person to be contacted for enquir	ries: Owner Agent	
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request that the compliance schedu	le for the above building be ame	ended as follows:
pecified system pecified system requiring amendment)	Amendment Required	Reason (state why amendment is required to ensure that the specified system meets the performance standards)
Proof of ownership (Please attach	one of the following as evidence, as a	appropriate to the circumstances)

The Agent (if applicant other than owner)