Advice of licensed building practitioner(s)

Building Act 2004, section 87

The building (*Project location*)

Owner must notify names of licensed building practitioners before restricted building work commences **You can hand this form to the Council's building inspector or send or deliver it to:**

Building Compliance and Consents, Wellington City Council, PO Box 2199, 12 Manners Street, Wellington. For enquiries, phone O4 801 4311.

Absolutely I Wellington	Positively City Council
Me Heke Ki Pōneke	

Council use only: Application #

Property ID

Building name (if applicable)					
Building street address (Property address)					
The project					
Building consent number (SR number)					
Person completing form					
Name of person completing form			Tel	ephone	
The owner (must be completed and all deta	ils must be the o	owner's)			
Owner's name (for individuals, state the preferred provide a contact person's name)	form of title, e.g. I	Mr, Mrs, Ms	s, Miss, Dr. For com	panies, trusts and c	other organisations
Applicant name					
Postal address				Post code	
Phone		Mobile			
After hours					
Date		Email			
Licensed building practitioners engaged t	o carry out/sup	ervise res	stricted building	work	
Particular work to be carried out or supervised	Name		Licensing class	(or registration n	practitioner number umber if treated as ider section 291 of Act)

Licensed building practitioners engaged to	o carry out/supervise res	tricted building	
Particular work to be carried out or supervised	Name	Licensing class	Licensed building practitioner number (or registration number if treated as being licensed under section 291 of Act)
Council use only			

Compilers only			
Council use only			
LBP(s) checked	Y	All OK	Y N
Comments			
Date issued			
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