

| | | | |
|---|---|--|--|
| Wastewater - Pressure | | (Pump Make/Model) _____ | |
| Connection Diameter | Pipe Material | Connection Type | |
| <input type="checkbox"/> 40mm | <input type="checkbox"/> uPVC | <input type="checkbox"/> Public Utility Service Connection | |
| <input type="checkbox"/> 50mm | <input type="checkbox"/> Vitrified Clay | <input type="checkbox"/> Septic Tank | |
| <input type="checkbox"/> 80mm | <input type="checkbox"/> Concrete | <input type="checkbox"/> Other _____ | |
| <input type="checkbox"/> Other _____ mm | <input type="checkbox"/> Other _____ | | |

| | | | |
|---|---|--|--|
| Wastewater - Gravity | | | |
| Connection Diameter | Pipe Material | Connection Type | |
| <input type="checkbox"/> 65mm | <input type="checkbox"/> uPVC | <input type="checkbox"/> Public Utility Service Connection | |
| <input type="checkbox"/> 80mm | <input type="checkbox"/> Vitrified Clay | <input type="checkbox"/> Soak Hole | |
| <input type="checkbox"/> 100mm | <input type="checkbox"/> Concrete | <input type="checkbox"/> Stream | |
| <input type="checkbox"/> Other _____ mm | <input type="checkbox"/> Other _____ | <input type="checkbox"/> Other _____ | |

| | | | |
|---|--|--|--|
| Wastewater - Disposal System Description | | | |
| Septic Tank | | Effluent Field | |
| Size: _____ litres | | Trench _____ m | |
| Type | <input type="checkbox"/> Septic tank DECOMMISSIONED | <input type="checkbox"/> Deep Soakhole | |
| <input type="checkbox"/> Ecotank | | Depth _____ m | |
| <input type="checkbox"/> Biocycle | | Number of holes _____ m | |
| | | <input type="checkbox"/> Other _____ | |

| | | | |
|---------------------------------|--------------|------------------------------|------------|
| Sanitary Facilities | | | |
| <input type="checkbox"/> Toilet | Number _____ | Waste Disposal Unit | |
| <input type="checkbox"/> Bidet | Number _____ | <input type="checkbox"/> No | |
| <input type="checkbox"/> Urinal | Number _____ | <input type="checkbox"/> Yes | Type _____ |

| | | | |
|--|--|---------------------------|--|
| Certification | | | |
| I _____ being | | | |
| <input type="checkbox"/> Owner | <input type="checkbox"/> Craftsman plumber | Registration Number _____ | |
| <input type="checkbox"/> Occupier | <input type="checkbox"/> Registered drainlayer | Registration Number _____ | |
| certify that this Private Utility Service As-Built Record is an accurate representation of the work carried out. | | | |
| _____ | | _____ | |
| Signature | | Date | |

Private Utility Service As-Built Record

(Section 216, Building Act 2004)

| | |
|--|--|
| Part A Consent Details (to be completed in all cases) | |
| Building Consent Number | |
| Applicants Name | |
| Applicants Mailing Address | |
| | |
| Site Address | |
| Part B As Built Services Information (to be completed in relation to service provided, ticking each box as appropriate) | |

| | | |
|---|---|--|
| Stormwater | | |
| Pipe Diameter | Pipe Material | Connection Type |
| <input type="checkbox"/> 80mm | <input type="checkbox"/> uPVC | <input type="checkbox"/> Public Utility Service Connection |
| <input type="checkbox"/> 100mm | <input type="checkbox"/> Vitrified Clay | <input type="checkbox"/> Soak Hole |
| <input type="checkbox"/> 150mm | <input type="checkbox"/> Ductile Iron | <input type="checkbox"/> Stream |
| <input type="checkbox"/> 225mm | <input type="checkbox"/> Concrete | <input type="checkbox"/> Drain |
| <input type="checkbox"/> Other _____ mm | <input type="checkbox"/> Other _____ | <input type="checkbox"/> Other _____ |

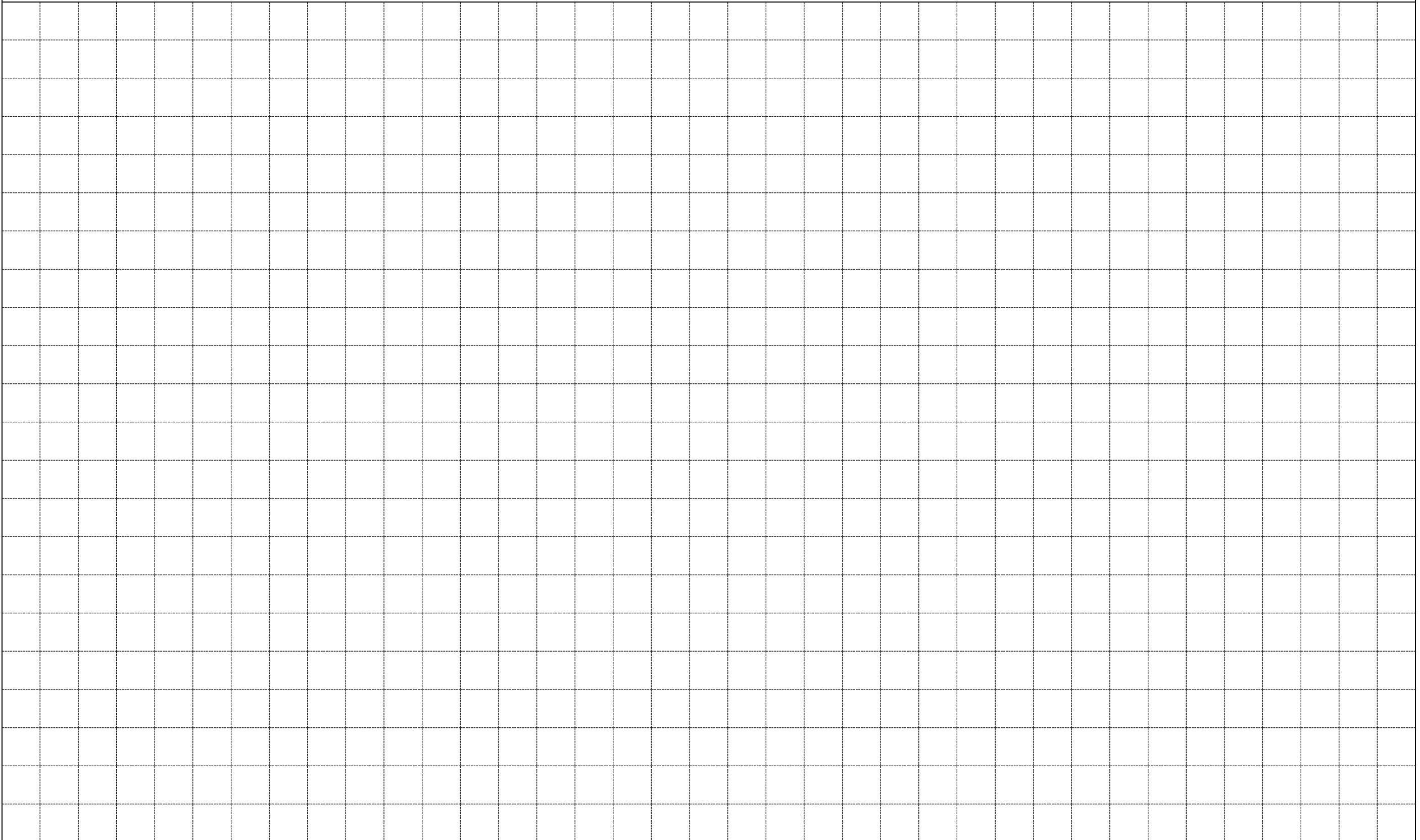
| | |
|---------------------------------------|--|
| Water Supply | |
| Pipe Material - Cold | Hot Water Cylinder |
| <input type="checkbox"/> uPVC | <input type="checkbox"/> High Pressure _____ Litre |
| <input type="checkbox"/> Copper | <input type="checkbox"/> Low Pressure _____ Litre |
| <input type="checkbox"/> Polybutylene | Meter Type |
| <input type="checkbox"/> Other _____ | Make _____ Model _____ |

| | | | | | | | | | |
|---------------------------------------|--|--|--|--|--|--|--|--|--|
| Pipe Material - Hot | Diameter _____ | | | | | | | | |
| <input type="checkbox"/> uPVC | Serial Number _____ | | | | | | | | |
| <input type="checkbox"/> Copper | Reading <table border="1" style="display: inline-table; vertical-align: middle;"> <tr> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> <td style="width: 20px; height: 20px;"></td> </tr> </table> m ³ | | | | | | | | |
| | | | | | | | | | |
| <input type="checkbox"/> Polybutylene | (Quote all black figures inclusive of zeros only) | | | | | | | | |
| <input type="checkbox"/> Other _____ | | | | | | | | | |

| | | |
|-------------|---------------|--------------------------------------|
| Note | Part B | As Built Services Information |
|-------------|---------------|--------------------------------------|

PART C: As Built Services Plan

(To be completed in all cases. If details are already noted on separate drawings then provide copies in duplicate as appropriate and attach to this sheet. Ensure that drawing numbers, etc, are noted below.)



Scale: _____ in _____
Site Address: _____

Please provide at least two measurements for each access point for future location