

26 March 2002

Private Bag 93109
Henderson
Waitakere City

Refer: Mr Greaves: (Field Services)
Extn. 8699 (Civic Centre)

D H Ghadwick
84 Shetland Street
Titirangi
WAITAKERE CITY

Req: 20020212
ENTERED

Dear Sir/Madam,

SAFE & SANITARY REPORT

PROPERTY LOCATION: 84 SHETLAND STREET, TITIRANGI
LOT 5 DP 40672

A recent inspection has established that a carport, bathroom/toilet and rumpus room have been undertaken/erected on your property without the authority of a building consent.

It has been established that the said works are in a safe and sanitary condition therefore no further action will be initiated by Council unless the building becomes dangerous or insanitary as specified under S64 of the Building Act 1991.

Yours faithfully



Richard Greaves
CUSTOMER FIELD ADVISOR
(BUILDING COMPLIANCE)

Please Fax Letter to Helen at Herley Smith 8186449. A15-181422

SAFE AND SANITARY INSPECTION REQUEST/FIELD SHEET

OWNERS NAME: D.H. GHADWICK Ph: 0212110741
SITE ADDRESS: 814. SHETLAND ST. LOT DP
DATE INSPECTION REQUIRED TITIRANGI AUKLAND
TUESDAY, 26th March. URGENT.
Please ensure access available NB: Inspectors attend on consecutive days unless otherwise requested.
SPECIFY UNAUTHORISED WORK TO BE INSPECTED Carport, Bathroom / Toilet & Rumpus Room.
DATE OF COMMENCEMENT OF WORK (MONTH/YEAR) Dec 1992
BUILDERS NAME (IF KNOWN)
NAME OF APPLICANT AS ABOVE
ADDRESS FOR CORRESPONDENCE AS ABOVE
(letter is sent to owner, copy to applicant)
A/C 37-5730-38590-786 Base Fee \$250.00 Additional Action + \$68/hr

OFFICE USE ONLY

File attached? Yes/Not avail.
Copy letter attached if applicable

BUILDING

SATISFACTORY ☒

NOT SATISFACTORY ☐

RECHECK OK ☐

List requirements Clearly:

BATHROOM w/c OK

ALL SATISFACTORY

BACKMOUNT DEVELOPMENT OK

CUSTOMER FIELD ADVISOR NAME: [Signature]

DATE: 26-3-07

P & D

SATISFACTORY ☒

NOT SATISFACTORY ☐

RECHECK OK ☐

List requirements Clearly:

CUSTOMER FIELD ADVISOR NAME: [Signature]

DATE: 26-3-07

PLANNING

SATISFACTORY ☐

NOT SATISFACTORY ☐

RECHECK OK ☐

List requirements Clearly:

CUSTOMER FIELD ADVISOR NAME:

DATE:

WPO

- Prepare letter UBW6 if all satisfactory. Return to Customer Field Advisor or
- Prepare letter UBW9 if requirements. Return to Customer Field Advisor or
- Prepare letter UBW11 as second letter after first sending a UBW9 letter.

Customer Field Advisor: Attach form to green letter copy and place in basket for data entry

RN QB7178