



All sections of this form must be completed by the applicator of the Waterproofing.

Building Consent No:	Project Address:
System or product used:	
Description of work and location of installation:	

Please tick	
<input type="checkbox"/> Yes	I have sighted the above building consent together with the waterproofing detail and confirm the waterproof membrane has been applied in accordance with the manufacturer's specifications and technical requirements.
<input type="checkbox"/> Yes	I also confirm all work has been carried out in accordance with the building consent and complies with the following clauses of the Building Code: B2 Durability and E3 Internal Moisture.

The following documents are attached: (tick as applicable)	
<input type="checkbox"/>	Product warranty:
<input type="checkbox"/>	Workmanship warranty:

I understand the Waitaki District Council will rely upon this declaration for the purposes of establishing compliance with the building consent and satisfaction on reasonable grounds of compliance with the New Zealand Building Code.

Applicator's contact details:			
Applicator's full name:			
Address:			
Mobile:		Email:	
Signature:			Date: ____/____/____