

# Building Warrant of Fitness (form 12)

## Section 108, Building Act 2004

Service Request No:

Property Ref:

### The Building

Street address of building:

Building name:

Location of building within site/block number:

Description of land where building is located:

Level/unit number:

Intended life of the building if 50 years or less:

Year first constructed (*approximate date is acceptable eg c1920s or 1960-1970*):

Highest fire hazard category for building use (*state number*):

Current, Lawfully established, use (*include number of occupants per level and per use if more than 1*):

### The Owner

Name of owner:

Street address/registered office:

Contact person:

Website:

Mailing address:

Landline number:

Mobile number:

Daytime number:

After hours number:

Email address:

Facsimile number:

### The Agent

Name of agent (*only required if warrant is being supplied on behalf of the owner*):

Relationship to owner (*state details of authorisation from the owner to supply the warrant on the owner's behalf*):

Contact person:

Mailing address:

Daytime number:

After hours number:

Email address:

Facsimile number:

### Warrant

The maximum number of occupants that can safely use this building is (*state maximum number*):

The inspection, maintenance, and reporting procedures of the compliance schedule for the above building have been fully complied with during the 12 months prior to the date stated below.

Anniversary date:

Expires:

The compliance schedule is kept at (*state location of compliance schedule*):

Attachments: a) Certificates relating to inspections, maintenance, and reporting.  
b) Recommendations for amendments to the compliance schedule.

Signature of owner/ agent on behalf of and with the authority of the owner:

Issue Date: