

# RANGITIKEI DISTRICT COUNCIL

## Producer Statement Construction (PS3)

0800 422 522 (24 hrs)  
E [info@rangitikei.govt.nz](mailto:info@rangitikei.govt.nz)  
46 High Street, Marton  
Private Bag 1102, Marton 4741

All sections of this PS3 must be completed

Tick applicable contractor for:			
<input type="checkbox"/> Building	<input type="checkbox"/> Emergency Lighting	<input type="checkbox"/> Cladding	<input type="checkbox"/> Escalator
<input type="checkbox"/> Waterproof Membranes	<input type="checkbox"/> Drainlayer	<input type="checkbox"/> Fire Alarm	<input type="checkbox"/> Lift
<input type="checkbox"/> Mechanical (HVAC)	<input type="checkbox"/> Solar Heating	<input type="checkbox"/> Other (specify):	

Author Details:	
Author name:	
Author company:	
Site address:	
Scope of work covered by statement:	
System/Product used: (if applicable)	

Declaration:	
I (constructor):	
have been engaged by: (applicant, designer, main contractor etc.)	
to construct	<input type="checkbox"/> part <input type="checkbox"/> all
As specified in the attached particulars of Building Consent Number:	
I am satisfied on reasonable grounds that the building work specified above and its attached conditions has been completed to the extent required by that Building Consent and complies with the NZ Building Code.	

NZBC clauses: (select as applicable)														
<input type="checkbox"/> B1	<input type="checkbox"/> B2	<input type="checkbox"/> C1	<input type="checkbox"/> C2	<input type="checkbox"/> C3	<input type="checkbox"/> C4	<input type="checkbox"/> C5	<input type="checkbox"/> C6	<input type="checkbox"/> D1	<input type="checkbox"/> D2	<input type="checkbox"/> E1	<input type="checkbox"/> E2	<input type="checkbox"/> H1		
<input type="checkbox"/> E3	<input type="checkbox"/> F1	<input type="checkbox"/> F2	<input type="checkbox"/> F3	<input type="checkbox"/> F4	<input type="checkbox"/> F5	<input type="checkbox"/> F6	<input type="checkbox"/> F7	<input type="checkbox"/> F8	<input type="checkbox"/> G1	<input type="checkbox"/> G2	<input type="checkbox"/> G3			
<input type="checkbox"/> G4	<input type="checkbox"/> G5	<input type="checkbox"/> G6	<input type="checkbox"/> G7	<input type="checkbox"/> G8	<input type="checkbox"/> G9	<input type="checkbox"/> G10	<input type="checkbox"/> G11	<input type="checkbox"/> G12	<input type="checkbox"/> G13	<input type="checkbox"/> G14	<input type="checkbox"/> G15			

I understand that this Producer Statement, if accepted, may be relied on by the Council for the purpose of establishing compliance with the Building Consent.

Contact Details:	
Registration No:	or Not Applicable <input type="checkbox"/>
Qualifications/Experience:	
Address:	
Phone:	
Email:	
Signature:	Date: