

Building Consenting Unit

Producer statement construction (PS3)

This statement must be completed by the installer and made available for the building inspector at the relevant inspection.
Upload this statement to [Online Services](#)

Indicate which type of system the statement is for:

- | | | | |
|---|---|---|------------------------------------|
| ☐ Under tile tanking | ☐ Barrier construction | ☐ Emergency lighting | ☐ Escalator |
| ☐ Roof or deck membrane | ☐ Wall cladding | ☐ Fire Alarm | ☐ Lift |
| ☐ Retaining wall tanking | ☐ Mechanical ventilation | ☐ Other (specify): _____ | |

Installer's details

Issued by: *(name of installer)*

Relevant qualifications or experience

Registration number (where applicable)

Name of business:

Phone number:

Email address:

Postal address:

Project details

Building consent number

Project address:

Statement details

Describe the scope of building work covered by this statement:

State the proprietary names of the building products or systems used:

State what supporting evidence has been provided for features of the building work that cannot be seen by visual inspection:
e.g. photos at key stages of the installation, proprietary system installation checklist, or an installer's warranty to be attached to this statement:

- ☐ I have seen the approved documents for the above building consent
- ☐ For the building work described above there have either been no changes made to the consented design, or the changes have been approved as an amendment or minor variation to the building consent
Details of any minor variations or amendments to the building consent
- ☐ I am satisfied the building work described above has been carried out in accordance with the building consent
- ☐ I understand that Christchurch City Council may rely on this statement as evidence to be satisfied to issue the code compliance certificate at the completion of the building work.

Installer's signature:	Date:

Documents attached *(please list the supporting documents you have attached)*