## Producer statement design (PS1)



Building Consent appli	cation number: (if	known)							
Location of building (pl			_/_	_/	_/	_ /			
To: \ Auckland	Franklin	Manukau	North Shore	Papakura	Rodney	Waitakere			
Issued by: (Author name)	Issued by: (Author name) KELVIN JOHN COOF			Author number: 1018					
On behalf of: (design	(design firm) CLC CONSULTING GROUP LIMITED								
In respect of: (descrip building work)	respect of: (description of ilding work)  BOARDWALKS								
at: (site address)									
Lot:				DP:					
We have been engage	ed by:	AUCKLAND COUNCIL to provide design services in respect of the							
requirements of Clau	se(s)	B1 & B2 of the Building Regulations 1992 for $\square$ all or $\square$ part							
only as specified in th	ne attachment to th	is statement, of the pro	oposed building wor	k.					
The design has been p	prepared by us in ac	cordance with:							
Compliance documents issued by the Department of Building and Housing  AS/NZS 1170  NZS 3603/3404/3101  (verification method/acceptable solution)  and/or									
Alternative so	lution as per the at	tached schedule			AS 2870				
The proposed building statement is describe			181	175					
and numbered:	STAMPED AND SIGNED BY CLC								
together with the spe	cifications and oth	er documents set out ir	n the schedule attach	ned to this statement.					
On behalf of the De	sign Firm, and subj	ect to:							
(i) Site verifica	tion of the followir	ng design assumptions:	INSPECT	INSPECTION OF FOOTINGS					
(ii) All propriet	ary products meeti	ng their performance sp	pecification requiren	nents.					
		building, if constructe				her documents			
		holds a current policy I, will be relied on by Co							
Construction Monitor	ing: (delete one)								
Construction m	nonitoring by the Er	ngineer is not required.							
Construction m	nonitoring is require	ed to level:	CM	CM3 - Footings					
(specific work it	ems requiring Engin	eer's Observations as pe	er the attached scheo	lule)					
P00029 01/07/10 V2									

Signed by: (Design	er)	K:	Leaves /		Date: 28	NOVEMBER 2013	
Print name:		KELVIN JOHN COOPER					
Qualifications: (Professional Quali	ifications)	BE(civil) DipBus(eng) MBA M.IPENZ IntPE AFNZIM					
Address:	РОВ	ox 51 547	' AUCKLAND	0		Postcode: 2140	
Phone: (Work)	576 3276 Mobile:				Fax:	576 3920	
Email	clc@clcgroup.co.nz					Postcode:	
Member of: MACI	ENZ VIPE	NZ DCPEng [	□ NZIA □ Other (specify)				
Registration number	er:	51274	<u> </u>				