## APPLICATION FOR AMENDMENT TO COMPLIANCE SCHEDULE (Form 11)

(Section 106, Building Act 2004)

BAM 011| V.2.1 2022



## Compliance Schedule Number:

	Street Address:(or Rapid Number if applicable):	Building Name (if applicable):			
	Legal Description:	Is this a staged consent? Yes No			
ING		If yes, state number of stages:			
THE BUILDING	Valuation Number:	Total floor area (all floors included)			
		Existing m <sup>2</sup>	Add: m <sup>2</sup>		
	Current lawfully established use	Approximate year building fi	rst constructed:		
	Location of building within site/block number:				
OWNER	NAME:				
	CONTACT PERSON (if owner is not an individual):				
	POSTAL ADDRESS:				
	EMAIL:				
тне (	PHONE:				
F	Evidence of ownership attached:				
	Certificate of Title Agreement Lease				
	Sale & Purchase Agreement Other				
	(This section only required if application being made on behalf of the owner)				
	NAME:				
	CONTACT PERSON (if owner is not an individual):				
THE AGENT	POSTAL ADDRESS:				
	EMAIL:				
	PHONE:				
	Relationship to owner (state details of authorisation to make the application on owners' behalf)				

## APPLICATION:

I request that the compliance schedule for the above building be amended as follows:

	SPECIFIED SYSTEMS	AMENDMENT	REASON (state why amendment is required to ensure that the specified system meets the performance standards)
SS1	Automatic Systems for Fire Suppression		
SS2	Emergency Warning Systems		
SS3.1	Automatic Doors		
SS3.2	Access Controlled Doors		
SS3.3	Interfaced Fire or Smoke Doors or Windows		
SS4	Emergency Lighting Systems		
SS5	Escape Route Pressurisation Systems		
SS6	Riser Mains		
SS7	Automatic Backflow Preventers		
SS8.1	Passenger Carrying Lifts		
SS8.2	Platform, Low-Speed and Service Lifts		
SS8.3	Escalators and Moving Walks		
SS9	Mechanical Ventilation or Air Conditioning Systems		
SS10	Building Maintenance Units		
SS11	Laboratory Fume Cupboards		
SS12.1	Audio Loops		
SS12.2	FM Radio and Infrared Beam Transmission Systems		
SS13.1	Mechanical Smoke Control		
SS13.2	Natural Smoke Control		
SS13.3	Smoke Curtains		
SS14.1	Emergency Power Systems 1- 13		
SS14.2	Signs for Systems 1 – 13		
SS15.1	System for Communicating Evacuation		
SS15.2	Final Exits		
SS15.3	Fire Separations		
SS15.4	Signs for Facilitating Evacuation		
SS15.5	Smoke Separations		
SS16	Cable Cars		

SIGNATURE			
Note: if Agent, state details of authorise	ation from owner to make applicati	ion on owner's behalf.	
Name of person signing:			
Signed by or for and on	behalf of the Owner	Date	Owner – Agent
Attachments Required:			
Copy of Existing Compliance Schedule			
Completed Specified Building Form (BAM028)			
INTERNAL OFFICE USE ONLY			
Compliance Schedule Number:			
Date Received:			