

January 16, 2025

Auckland Council  
Attention: Building Control  
Auckland Central  
Email: RegsupportBWOFF@aucklandcouncil.govt.nz

Dear Sir/Madam

BID: 5301  
Building: Mountview Village, 2-106 Harold Street, Mt Eden, Auckland  
C/S No: WOF20442164

**Please see attached documents.**

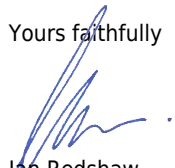
We have recently completed the Warrant of Fitness management for the above building and as requested by our client have signed the Building Warrant of Fitness as the owner agent.

The annual reports signed by the IQP maintainers are available with the Compliance Schedule in the report to our client. The full report is available to be audited by council from our web site [www.bcgroun.co.nz](http://www.bcgroun.co.nz).

BC Group has approval from the building owner to act as the owner agent for BWOFF management. This was given in our original quote to our client. Any charges by council to the building owner are to be invoiced to the owner directly.

If you have any queries regarding this report please do not hesitate to contact the BC Group office.

Yours faithfully



Ian Redshaw  
Managing Director, BC Group

**Auckland Council Requires**

(1) Council will accept a S-RaD / B-RaD (2) Council will accept a partial 12a from 2 contractors if it equals 12 months compliance. A Form 12 can then be issued (3) Council will not accept a Form 12 where 2 x S-RaD make 12 months compliance. A B-RaD must be issued (4) Council will not accept a 12a signed & dated outside the required 'TESTING TIME FRAME' for that SS

# FORM 12

## BUILDING WARRANT OF FITNESS

### Section 108, Building Act 2004

**Compliance schedule number:** WOF20442164

**Compliance schedule anniversary date:** 1st March

**WOF expiry:** 1st March 2026

#### BUILDING DETAILS

**Building name:** Mountview Village

**Street address of building:** 2-106 Harold Street, Mt Eden, Auckland

**Legal description of land where building is located:** LOT 1 DP 196190

**Location of building within site:**

**Current, lawfully established use:** Residential

**Year first constructed:** 2001

**Highest fire hazard category for building use:** Not known

#### OWNER DETAILS

**Name of owner:** Body Corporate 200012

**Mailing address:** P O Box 56427 Dominion Road, Auckland

**Street address:** 2-106 Harold Street & 1-59 Mary Street, Mount Eden, Auckland

**Contact person:** Peter James, Body Corporate 200012

**Phone numbers:** 0272860930

**Email address:** peter@peterjames.co.nz

**Website:** www.200012.co.nz

#### AGENT DETAILS

**Name of agent:** Building Compliance Group Ltd (BC Group)

**Mailing address:** PO Box 14 675, Panmure, Auckland

**Contact person:** Cathy Hodge

**Email:** cathyh@bcgroup.co.nz

**Relationship to owner:** Owner-authorised Agent

#### SPECIFIED SYSTEMS

Automatic Backflow Preventer

#### WARRANT

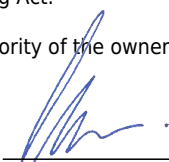
The inspection, maintenance, and reporting procedures of the compliance schedule for the above building have been fully complied with during the 12 months prior to the date stated below.

The current Compliance Schedule along with 2 years of compliance records can be viewed via the web link shown at the bottom of this form. The logbook recording contractors visits is kept at the building address stated above. These records are available for any person or organisation who has the right to inspect the building under the Building Act.

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

Ian Redshaw (Owner's Agent)

Name & Position

  
Signature

16/01/2025

Date



**FORM 12A**  
**CERTIFICATE OF COMPLIANCE WITH INSPECTION**  
**MAINTENANCE, AND REPORTING PROCEDURES**  
**Section 108(3)(C), Building Act 2004**

**ATTENTION:**

**HydroTech / TDG Environmental**

Kath Kath 021 730 878 AKLadmin@tdgenvironmental.com

**Please attach the back flow test report to the 12A form.**

BWOF expires: **Saturday, 1 March 2025**

To comply with the councils policy and CS requirements, please return report after the last inspection frequency date, and before BWOF expiry date.

**BUILDING DETAILS**

**Building name:** Mountview Village

**Street address:** 2-106 Harold Street, Mt Eden, Auckland

**Compliance schedule:** WOF20442164

**Legal description:** LOT 1 DP 196190

**OWNER DETAILS**

**Name of owner:** Body Corporate 200012

**Mailing address:** P O Box 56427 Dominion Road, Auckland

**Street address:** 2-106 Harold Street & 1-59 Mary Street, Mount Eden, Auckland

**Contact person:** Peter James, Body Corporate 200012

**Phone numbers:** 0272860930

**Email address:** peter@peterjames.co.nz

**Website:** www.200012.co.nz

**COMPLIANCE DECLARATION**

The inspection, maintenance, and reporting procedures of the compliance schedule have been fully complied with during the 12 months prior to the date stated below in relation to the following specified system(s):

**AUTOMATIC BACKFLOW PREVENTER**

A.SARGENT 110273

IQP Name & Registration Number



IQP Signature

07/01/25

Date

**Notes:**

Return signed forms to BC Group by email: docs@bcgroup.co.nz

This a work order for BC Group. See information sheet for agreed payment amount.



## Backflow Prevention Checklist

Compliance Schedule BID: 5301 Building Consent No. \_\_\_\_\_

Owner/ Occupier \_\_\_\_\_

Address 2-106 HAROLD ST, MT EDEN, AUCKLAND

Contact Person \_\_\_\_\_ Telephone ( ) \_\_\_\_\_

Attention: Health & Safety Office/ Site Engineer

The cross-connection control device detailed herein has been tested and maintained as required by the (rules or regulations) of (regulatory agency) and is certified to comply with these (rules or regulations).

Type of device: DC Size: 25

Make of Device: WATTS Located at: REAR OF UNIT 9 ON

Model number: 007 EXTERNAL WALL

Serial number: 01466 Plane of B/F: Vertical Horizontal

Test Date: 07/01/25 Line strainer: Yes No

	Reduced Pressure Devices			Pressure Vacuum Breaker	
	Double Check Devices		<del>Relief Valve</del>	<del>Air Inlet</del>	<del>Check Valve</del>
	1st Check	2nd Check			
Initial Test	DC-Closed Tight <input checked="" type="checkbox"/> RP <u>11</u> Kpa Leaked <input type="checkbox"/>	Closed Tight <input checked="" type="checkbox"/> RP <u>13</u> Kpa Leaked <input type="checkbox"/>	Opened at _____ Kpa	Opened at _____ Kpa Did not open <input type="checkbox"/>	_____ Kpa Leaked <input type="checkbox"/>
Repairs and Materials Used					
Test after Repair	DC - Closed Tight <input type="checkbox"/> RP _____ Kpa	Closed Tight <input type="checkbox"/> RP _____ Kpa	Opened at <input type="checkbox"/> _____ Kpa	Opened at <input type="checkbox"/> _____ Kpa	_____ Kpa
		Pass <input type="checkbox"/>	Fail <input type="checkbox"/>		
Visual Inspection air gap Vacuum break	Pass <input type="checkbox"/>	Fail <input type="checkbox"/>	Pressure Test PSI		

Are there any connections between the point of entry and the backflow preventer or other deficiencies?

\*If YES, please explain in detail in the space provided or on additional paper

BOUNDARY DEVICE



WATER METER SERIAL \_\_\_\_\_

The above is Certified to be true.

Firm Name TDG Environmental  
Firm Address 10 Bancroft Crescent, Glendene, Auckland 0602  
Telephone 09 813 6340  
Email [AKLadmin@tdgenviroental.com](mailto:AKLadmin@tdgenviroental.com)

Name of Tester A. Sargent  
Craftsman no.  
Test kit serial no. 022803  
IQP no. 110273  
Calibration Date. 20/08/2024