

Producer statement - PS3

Water supply pressure test

Building consent number				
Site address				
Owner(s)	Telephone			
Agent/ contact	Telephone			
System or product used				
Description of work and location of installation				
I have been engaged to undertake plumbing work on the above building consent and confirm that a pressure test for water tightness has been undertaken in accordance with:				
(tick applicable)				
□ NZ Building Code G12/	AS1 – 1500kPa for a period of not less than 15 minutes			
□ AS/NZS 3500.5:2012 – 1	1500kPa for a period of not less than 30 minutes			
Proprietary brand system with specific testing requirements as follows:				
☐ Brand				
☐ Test requirements				
☐ Manufacturer's testing forms provided (where applicable)				
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CERTIFIYING PLUMBER'S DET	AILS			
CERTIFIYING PLUMBER'S DET Full name	AILS			
	AILS			
Full name	AILS			
Full name License number	AILS			
Full name License number Qualification	AILS			
Full name License number Qualification Address	AILS			
Full name License number Qualification Address Telephone Email	AILS r scanned image of the licensed plumber's registration card.			
Full name License number Qualification Address Telephone Email Please attach a photocopy of By completing this form, I undersposes of establishing components of the New Zerompliance with the New Zerompliance	r scanned image of the licensed plumber's registration card. Inderstand Southland District Council will rely upon this declaration for the pliance with the building consent and satisfaction on reasonable grounds of aland Building Code.			
Full name License number Qualification Address Telephone Email Please attach a photocopy of By completing this form, I undergroup of the second and the seco	r scanned image of the licensed plumber's registration card. Inderstand Southland District Council will rely upon this declaration for the pliance with the building consent and satisfaction on reasonable grounds of aland Building Code. Rescribed in the building consent has been carried out by me, or my employee,			
Full name License number Qualification Address Telephone Email Please attach a photocopy of By completing this form, I unpurposes of establishing components of the New Zerond I hereby state that the work of and that the employee holds;	r scanned image of the licensed plumber's registration card. Inderstand Southland District Council will rely upon this declaration for the pliance with the building consent and satisfaction on reasonable grounds of aland Building Code. Rescribed in the building consent has been carried out by me, or my employee,			



I hereby certify that the works described above and within this building consent has been tested and verified by me.

Signature	Date	

The purpose of the Water Supply Pressure Test Statement is to provide Southland District Council with a permanent record of pressure test results for the respective building consent. The document also confirms that the plumbing work has been completed, or supervised by a certifying plumber in accordance with the Plumbers, Gasfitters and Drainlayers Act 2006.

- a) The pressure test statement is required to be completed by the certifying plumber and issued to Southland District Council for all water supply installations subject to a building consent where the water supply test has not been viewed and recorded by a Southland District Council building inspector.
- b) Please ensure that the pressure testing method is specified and attached to this certificate any proprietary brand manufacturers testing certificate where manufacturer requires them as part of their quality control regime.
- c) Where a property is serviced by a low pressure or tank supply, please describe the test regime used. Please contact Southland District Council building services team with any queries relation to this form by either email to building-cs@southlanddc.govt.nz or alternatively phone 0800 732 732

FOR COUNCIL USE ONLY					
Reason(s) for □ acceptance □ refusal					
Λ 11					
Assessed by					
Signature		Date			