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| **Application for Special Assessment**  **Building Consent Authority Accreditation Programme** | C:\Users\bra\Documents\IANZ Logo plain (cropped).jpg |

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| **1 Applicant**  Organisation/Division/Section, etc. |  |
| **2 Accreditation Number** |  |
| **3 Postal Address** |  |
| **4 Physical Location**  Street address of the primary location of the organisation to be assessed e.g. head office.  Please also provide addresses for any service centres operated (these could be listed separately and provided as an attachment) and a list of activities undertaken at each centre. |  |
| **5 Email Invoice address**  Email address to which invoices are to be sent |  |
| **6 Purchase Order Number**  Please provide prior to the assessment if one is required by your organisation to pay invoices relating this assessment |  |
| **7 Chief Executive Officer** | Name  Email |
| **8 Authorised Representative**  Name and title of the person who is the formal contact between IANZ and the BCA. | Name  Job Title  Email  DDI  Mobile |
| **9 Responsible Manager**  Name and title of the person who is responsible for routine BCA management. | Name  Job Title  Email |
| **10 Quality Manager(s)**  Name and title of the person(s) who has primary responsibility for management of the Quality System. | Name  Job Title  Email |
| **11 Attachments** | Procedural documentation  Other (specify) |
| **12 Commitment to meeting accreditation requirements**  We commit to continuing to meet the requirements for accreditation as set out in the IANZ criteria documents and the Building Consent Authority Procedures and Conditions of Accreditation including the following:  We undertake to ensure that our operations, staff, facilities, and procedures will continue to fulfil the general criteria for accreditation and relevant specific criteria for accreditation.  We undertake to immediately notify IANZ of any significant changes in operations, facilities, procedures or staff, which are likely to affect our accreditation or the terms in which the accreditation is expressed.  We undertake to allow IANZ reasonable access to our operations, facilities and procedures, for the purpose of surveillance, routine and special assessments from time to time.  We undertake to pay all fees outlined in Regulation relating to such assessments.  We agree to supply any information needed for the assessment of the organisation.  Signed for and on behalf of the Building Consent Authority:   |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | | **Name** |  | **Signature** |  | **Date** |  |   *(This authorisation shall be made by appropriate senior management)* | |
| **13 Notes for Applicants**  **Criteria and Rules**  Before lodging a formal Application for Special Assessment, organisations should ensure that their systems, procedures and facilities continue to meet the Building (Accreditation of Building Consent Authorities) Regulations 2006 and all IANZ accreditation criteria and conditions for accreditation.  **Fees**  Fees for Special Assessment are defined in the in the Building (Accreditation of Building Consent Authorities) Regulations 2006. | |
| |  |  | | --- | --- | | **Please return your application and any attachments through the IANZ portal or send the application, together with relevant attachments, to:** | | |  | IANZ | | **Post** | Private Bag 28908  Remuera  Auckland 1541 | |  | |  | | **Physical** | Building 7, Central Park, 660-670 Great South Road  Ellerslie  Auckland 1051 | |  | |  | | **Telephone** | (09) 525 6655 | | **Facsimile** | (09) 525 2266 | | **Email** | [info@ianz.govt.nz](mailto:info@ianz.govt.nz) | | **Attention** | Adrienne Woollard | | **NZBN** | 9429046194077 | | |