**Building Warrant of Fitness Report and Declaration**

**Non-compliance with compliance schedule:** #

This report has been issued in lieu of a building warrant of fitness (BWoF). Its purpose is to notify building occupants:

1. that one or more procedures required for a BWoF to be supplied and displayed were not carried out
2. about the current performance status of each specified system.

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| **THE BUILDING** |
| Building name: - | Street address of building: - |
| Level/unit number: - |  Location within site/block: - |
| **OWNERS DECLARATION** |
| A BWoF was unable to be supplied and displayed because one or more scheduled inspection and/or maintenance procedures of the compliance schedule was not carried out.The following table details whether a specified system was affected by the missed procedures and the current performance of the specified system with its respective performance standard. |
| **SPECIFIED SYSTEM SUMMARY REPORT** |
| Specified system | Procedure missed  | Currently performing  | Form 12A supplied | S-RaD supplied |
| *Example: Emergency warning system* | *Y* | *Y* | *N/A* | *Y* |
| *Example: Automatic doors**(Insert further rows if required)* | *N* | *Y* | *Y* | *N/A* |
| For more information on inspection, maintenance and reporting procedures missed and/or current performance details, please see the individual Specified System Report and Declaration (S-RaD) for the specified system concerned. Signature of \*owner/\*agent on behalf of and with the authority of the ownerDate: D/M/Y |
| **OWNER/AGENT** |
| Name: -Company (if applicable): - | Mailing Address: -Contact Number: - |
| **BUILDING USE AND OCCUPANCY** |
| **Current, lawfully established use** | **Activity**(Change of Use Regulations) | **Fire design category** | **Occupant Load**(Fire Design) |
| **Level** | **Classified Use(s)** (from NZBC A1, plus basic description) | **Risk Group** (Acceptable solution (AS), post-2012) | **Highest Fire Hazard Category** (AS pre-2012) |
| - | - | - | - | - | - |
| **COMPLIANCE SCHEDULE** |
| Compliance Schedule Anniversary: D/M/Y  | Location where compliance schedule is kept:- |

*\* Delete that which is not applicable*