

BWoF Information Checklist (Based on Form 12)

Important: Please use this checklist to ensure you provide all the necessary information for your Building Warrant of Fitness (BWoF) which is the building owner’s annual statement confirming the specified systems in the compliance schedule for their building have been maintained and checked for the previous 12 months, in accordance with the compliance schedule.

Submitting complete and correctly formatted information will enable us to process your application efficiently. This includes:

- **Format:** Please provide the information in a clear, legible PDF format. Note, we do not accept zip files.
- **Accuracy:** Ensure all information is accurate and matches the details in the compliance schedule.
- **Completeness:** Providing all the required information will prevent delays in processing BWoF.
- **Supporting Documents:** If you are providing separate documents, clearly label them with the corresponding section number from this checklist (e.g., "1 - Compliance Schedule Number").
- **Documents:** For processing efficiency please place the renewal documents before the reporting documents.

Further Assistance: Please contact our BWoF team at bwof.contact@dcc.govt.nz

The following information is required:

Building and Owner Details	
Compliance schedule number	Provide the compliance schedule number <i>(found on current compliance schedule)</i> .
Compliance schedule anniversary date	Provide the compliance schedule anniversary date (DD/MM or DD/MM/YYYY), or the BWoF expiry date for the year the documentation relates to (DD/MM/YYYY). <i>Note: Visit www.dunedin.govt.nz/compliance-schedule for date guidance.</i>
Lawfully established use	Provide the lawfully established use <i>(found on current compliance schedule)</i> .
Number of occupants	Provide the number of occupants <i>(found on current compliance schedule)</i> .
Specified systems	List accurate details of specified systems. <i>Note: Listed on the current compliance schedule that the IQP below is qualified to sign.</i>
Address and legal description	Provide the full street address <i>(found on current compliance schedule)</i> . Provide the legal description (Lot, DP number, etc.) as separate items. <i>Note: Can be obtained from current compliance schedule or DCC Ratings database. Although not mandatory, if supplied, please ensure this information is accurate.</i>
Owner/Licensee	Provide the full name of the owner/licensee <i>(found on current compliance schedule)</i> . <i>Note: It is the owner’s responsibility to ensure the compliance schedule owner details are current. This can result in a rejection if not as per our system details.</i>
Mailing address	Provide the full mailing address of the owner/agent <i>(found on current compliance schedule)</i> . <i>Note: It is the owner’s responsibility to ensure the compliance schedule owner details are current. This can result in a rejection if not as per our system details.</i>
12-month Compliance Statement	
12-month wording	Provide the full 12-month wording statement as below: <i>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 in relation to the following specified system/s.</i>
Compliance Schedule Location	
Compliance schedule location	State where the compliance schedule is kept.

Certification

Signed and dated

Provide the signature of the Independent Qualified Person (IQP) completing the form.

Provide the date of signing. Ensure the signing and dating is within 3 months of the expiry date.