

Inspection Checklist – Preline Plumbing

Address: _____ Building Consent No.: _____

Tradesperson: _____ Tradesperson: _____

Date: _____ Time: _____

Weather Conditions: wet / fine Staged/Partial Inspection: _____ of _____

| Item to be inspected for compliance: with the Building Act 2004, NZBC & Approved Documents | Outcome ¹ | | | Details of Inspection & Comments: Comments must be made for: 1. Non-complying Items 2. Items/work deviates from approved documents 3. Detail alternative solution & how compliance achieved |
|--|----------------------|-----|------|--|
| | Pass | N/A | Fail | |
| Conditions of consent/site instructions read? | | | | Yes/No |
| Approved plans & specifications sighted? ² | | | | Yes/No |
| Approved plans include specific design detail? | | | | Yes/No |
| Previous Underfloor/Preslab – Soil/Drain/Wastes inspection passed? | | | | |
| Reg No: / License current? | | | | Name and #: |
| Special PPE required for this site? | | | | Specify: safety footwear / eye protection / dust mask high visibility jacket / hard hat Other: |
| Pipe Out | | | | |
| Identify pipe material type: | | | | Hot: Cold: |
| Water supply pipe support: | | | | Wall spacing: mm Ceiling spacing: mm |
| Pipe-size – Water heater to kitchen | | | | |
| Hot Water pipe lagging | | | | |
| Backflow Protection Required? | Yes / No | | | |
| Pipe Insulation | | | | |
| Pressure test observed | | | | lbs/Kpa |
| Internal terminal vent fitted | | | | Location: |
| Soil stack | | | | |
| Branches enter at appropriate grade | | | | |
| Level invert fitted correctly | | | | |
| No connections within 600mm rollover | | | | |
| Soil stack vented correctly | | | | |
| Size of vent | | | | mm |
| Soil Stack water / air tested | | | | |
| Floor waste gullies | | | | |
| Fixtures connecting to floor waste gully in same room | | | | |
| Grade on pipework | | | | |
| AAV installed as per manufacturer's recommendation | | | | |
| Drains & waste supported | | | | |
| Fire Collars | | | | |
| Wall | | | | |
| Floor | | | | |
| Ceiling | | | | |
| Notes³: | | | | |
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|--|----------------------|-----|----------|--|
| | Pass | N/A | Fail | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Amended plans required? | Yes/No | | Officer: | |
| Amended specifications required? | Yes/No | | | |
| Reinspection required? | Yes/No | | Signed: | |
| Site instruction issued? | Yes/No | | | |
| Pre-line plumbing inspection passed? | Yes/No | | Date: | |

¹ Pass = Compliance with approved plans & documentation, N/A = Not applicable to this project, Fail = Non-compliance with approved plans & documentation.

² Approved stamped site plan, foundation plan, cross section drawings, truss layout and fixing detail, specifications, engineer detail, floor plan, drainage plan, effluent disposal site plan and detail

³ Note any additional information, including safety issues