

Form 12



PROJECT & CONSTRUCTION MANAGEMENT
PROPERTY MANAGERS & CONSULTANTS

BUILDING WARRANT OF FITNESS Section 108 Building Act 2004

Issued: 12 May 2025

Number: 728D

Expires: 12 May 2026

The building

Building name: **Pinnacle Apartments**
Legal description of land where building is located: **Lot 1 DP 431170**
Street address of building: **160 Victoria St, Wellington**
Location of building within site/block number:
Level/unit number: **N/A**
Current, lawfully established, use: **Residential Apartments/Carparking/Retail**
Year first constructed: **2021**
Intended life of the building if 50 years or less:
Highest fire hazard category for building use: **2**

The owner

Name of owner: **CS No 1 Ltd**
Contact person: **M L Colman**
Mailing address: **C/- PO Box 83013 Edmonton AUCKLAND 0652**

Agent

Name of agent: **Delta Management Limited**
Contact person: **M L Colman**
Mailing address: **PO Box 83013 Edmonton AUCKLAND 0652**
Phone Number: **Daytime: 09 8363918 Mobile: 0274 921 943**
Facsimile number: **09 838 5464**
Relationship to owner: **Manager / Independent Qualified Person**

Warrant

The maximum number of occupants that can safely used this building is: 612

The inspection, maintenance and reporting procedures of the Compliance Schedule No: 490395 for the above building have been fully complied with during the 12 months prior to the date stated below.

SS01	Automatic Systems for fire suppression
SS02	Automatic/Manual Emergency Warning system for fire or other dangers
SS03/1	Automatic Doors
SS03/2	Access Controlled Doors
SS03/3	Automatic Doors
SS04	Emergency Lighting System
SS06	Riser Mains
SS07	Backflow
SS08/1	Lifts Passenger Service
SS09	Mechanical Ventilation
SS14/2	Signs related to a system or feature specified in any clauses 1 to 13
SS15/2	Means of Escape from Fire (Final Exits)
SS15/3	Means of Escape from Fire Fire Separations
SS15/4	Signs for communicating information intended to facilitate evacuation
SS15/5	Means of Escape from Fire (Smoke Separations)

The Compliance Schedule is kept at: 29 Taitua Drive, Te Atatu South Auckland 0610 with a copy at the property in the Compliance Manual

Attachments

Certificates relating to inspections, maintenance and reporting

Signature of M L Colman

25 April 2025
Date

CERTIFICATE OF COMPLIANCE WITH INSPECTION, MAINTENANCE, AND REPORTING PROCEDURES**SECTION 108 (3) (c) – BUILDING ACT 2004 – FORM 12A****THE BUILDING:**

Street Address of the building: 160 Victoria Street
Legal description of land where building is located: LOT 1 DP 431170
Building Name: Pinnacle Apartments
Location of building within site / block number:
Level / Unit number: 17 Levels

THE OWNER:

Name of Owner: CS No. 1 Limited
Mailing Address: PO Box 11680 Manners Street Wellington 6142
Street Address:

COMPLIANCE:

The inspection, maintenance, and reporting procedures of the compliance schedule no: 490395 have been fully complied with during the 12 months prior to the date stated below in relation to the following specified system/s:

SS1	AUTOMATIC SYSTEMS FOR FIRE SUPPRESSION	COMPLIANT
SS2	EMERGENCY WARNING SYSTEMS	COMPLIANT
SS3.3	INTERFACED FIRE OR SMOKE DOORS OR WINDOWS	COMPLIANT
SS6	RISER MAINS	COMPLIANT

Signed by the Independent Qualified Person:

SIGNATURE:

Paul Ruawai

NAME:

Paul Ruawai

POSITION:

Sprinkler Service Manager

IQP REGISTRATION NUMBER: 143497

DATE: 30 April 2025

All reasonable care has been taken to ensure that the information provided in this annual report is correct at the time of writing. We will not accept any liability for anything done or not done in reliance on the information in this annual report.

Date: **April 24, 2025**



Form 12A

Certificate of compliance with inspection, maintenance, and Reporting procedures

CS490395

The Building

Street address of building: 160 Victoria Street, Wellington
Legal description of land where building is located: LOT 1 DP 431170
Building name: Pinnacle Apartments
Location of building within site/block number:
Level/unit number: 17 levels

The Owner

Name of owner: CS No. 1 Ltd
Contact person:
Mailing address: PO Box 11680, Manners Street, Wellington 6142
Street address:

Compliance

The inspection, maintenance, and reporting procedures of the compliance schedule have been fully complied with during the 12 months prior to the date stated below in relation to the following specified system/s:

SS3/2 Access Controlled Doors
SS4 Emergency Lighting Systems

DATE OF ANNUAL IQP INSPECTION: 3rd April 2025

DATE OF IQP RE-INSPECTION: Nil

REGISTRATION NO: 117489

TITLE: Dino Toscano, BCIS Ltd
Independent Qualified Person

SIGNATURE: 

DATE: 15/5/2025

PO Box 158, Waikanae 5250, New Zealand
Telephone 04 293 2800 Facsimile 04 293 2801 Mobile 0274 479 087 Email bcis@xtra.co.nz

BCIS (BUILDING COMPLIANCE INSPECTION SERVICES) LTD



4446795090

BACKFLOW CONSULTANTS [WGTM]

L.B. White Ltd
42 Victoria St Lower Hutt
Business 587 1023 • Mobile 0274 426 006 • office@lbwhite.co.nz • www.lbwhite.co.nz

Form 12A - Certificate of compliance with inspection, maintenance, and reporting procedures Section 108(3)©, Building Act 2004

Test Certificate - The following backflow prevention device has been tested in accordance with the **Building Regulations 1992**

Owner of Building: CS NOI LTD

Contact Person: Ross Alcock

Client Address: 166 Victoria Street, Te Aro, Wellington

Client Email: daryl.mahony@aplproperty.co.nz

Phone Number:: 0274544516

Device Address: 160 Victoria St, Wgtn - Sprinkler Pump Room,

Device Location: Sprinkler Pump Room

Device Purpose:

Legal Description of Land where building is located: LOT 1 DP43117

Make: Watts

Size (mm): 100

New Device: No

Device Type: DCV

Model No: COLT

Serial Serial No: TG1217

Correct Installation? Yes

1st Check (kPa)	2nd Check (kPa)	Relief Valve (kPa)
24.3	21.8	

Air Gap (mm)

Air Inlet (Y/N)

Air Inlet opened at (kPa)

Result: PASS

Date Tested 17 Apr 2025

I.Q.P / LBP: 157152 (HW)

Signed off:

Tested by: Howard White

Remarks: no isolation valve installed


Compliance – The inspection, maintenance, and reporting procedures of the compliance schedule have been fully complied with during the 12 months prior to the date stated below in relation to the following specified system: **Automatic backflow preventer connected to a potable water supply**

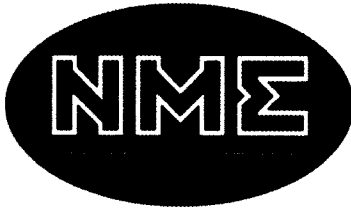


McIntyre Lift Compliance and Consulting Ltd
mike@mcintyrelifts.com
021 391492

Form 12A Section 108 (3) (c) Building Act 2004

CERTIFICATE OF COMPLIANCE WITH INSPECTIONS MAINTENANCE AND REPORTING PROCEDURES

Building Name: Pinnacle Apartments	Legal Description of land where building is located: LOT 1 DP 431170
Street address of Building: 160 Victoria Street, Wellington	Location of Building within site/block number: Refer to actual BWOFF.
Level/Unit Number: Refer to actual BWOFF.	Compliance Schedule No: 490395
THE OWNER	
Name of Owner: Pinnacle Body Corporate 548838	Contact Person:
Mailing Address: PO Box 7077 Newtown Wellington 6242	Street Address/Registered Office:
The inspection, maintenance, and reporting procedures of the compliance schedule have been fully complied with during the 12 months prior to the date stated below in relation to the following specified system/s:	
2004 SYSTEMS – as per Compliance Schedules issued under Building Act 2004	
<input type="checkbox"/> SS1-Automatic systems for fire suppression	<input type="checkbox"/> SS10-Building maintenance units
<input type="checkbox"/> SS2-Emergency warning systems	<input type="checkbox"/> SS11-Laboratory fume cupboards
<input type="checkbox"/> SS3/1-Automatic door	<input type="checkbox"/> SS12/1-Audio loops
<input type="checkbox"/> SS3/2-Access controlled doors	<input type="checkbox"/> SS12/2-FM & infrared transmission systems
<input type="checkbox"/> SS3/3-Interfaced fire or smoke doors or windows	<input type="checkbox"/> SS13/1-Mechanical smoke control
<input type="checkbox"/> SS4-Emergency lighting systems	<input type="checkbox"/> SS13/2-Natural smoke control
<input type="checkbox"/> SS5-Escape route pressurisation systems	<input type="checkbox"/> SS13/3-Smoke curtain
<input type="checkbox"/> SS6-Riser mains	<input type="checkbox"/> SS14/1-Emergency power systems
<input type="checkbox"/> SS7-Automatic Backflow Preventer's	<input type="checkbox"/> SS14/2-Signs
<input checked="" type="checkbox"/> SS8/1-Passenger carrying lift	<input type="checkbox"/> SS15/1a-Spoken information to facilitate evacuation
<input type="checkbox"/> SS8/2-Service lift	<input type="checkbox"/> SS15/2b-Final exits
<input type="checkbox"/> SS8/3-Escalator & moving walk	<input type="checkbox"/> SS15/3c-Fire separations
<input type="checkbox"/> SS9-Mechanical ventilation/air conditioning systems	<input type="checkbox"/> SS15/4d-Signs for facilitating evacuation
<input type="checkbox"/>	<input type="checkbox"/> SS15/5e-Smoke separations
Comments, such as numbers of units, locations etc. 4 x Passenger Lifts	
Name of IQP (Please Print): Mike McIntyre	
Name of IQP Company: McIntyre Lift Compliance and Consulting Ltd	IQP Number: 446801
Signature of IQP: 	Date: 30.04.2025



8 Victoria Street
Lower Hutt
PH: 5890310
Fax: 5860320
tony@nme.co.nz

FORM 12 A

Certificate of Compliance with Inspection, Maintenance and Reporting Procedures

Section 108(3)(c), Building Act 2004

THE BUILDING

Street Address: 160 Victoria Street, Wellington
Legal Description of land where building is located: Lot 1 DP 431170
Building Name: Pinnacle Apartments
Location of Building within site/block number:
Level/Unit Number:

THE OWNER

Name of Owner: CS No 1 Ltd
***Contact Person:** M L Colman
Mailing Address:
Street Address: C/- PO Box 83013, Edmonton, Auckland 0652
Date: 12/5/2025

COMPLIANCE

The inspection, maintenance, and reporting procedures of the compliance schedule have been fully complied with during the 12 months prior to the date stated below in relation to the following specified system/s:

- **SS9 Mechanical Ventilation or Air Conditioning**

COMMENTS

Tony O'Connell
Signature of licensed building practitioner:

151012

Registration No.



Form 12A

Certificate of compliance with inspection, maintenance, and reporting procedures

Section 108(3)(c), Building Act 2004

The building

Building name: **Pinnacle Apartments**
Legal description of land where building is located: **Lot 1 DP 431170**
Street address of building: **160 Victoria St, Wellington**
Location of building within site/block number:
Level/unit number:

The owner

Name of owner: **CS No 1 Ltd**
Contact person: **M L Colman**
Mailing address: **C/- PO Box 83013, Edmonton, AUCKLAND 0652**

DELTA
MANAGEMENT

Compliance

The inspection, maintenance and reporting procedures of the Compliance Schedule no 290951 have been fully complied with during the 12 months prior to the date stated below in relation to the following specified system/s:

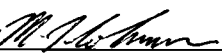
Signs related to a system or feature specified in any clauses 1 to 13 SS 14/2	✓	Means of escape from fire (Final Exits) SS 15/2	✓	Means of Escape from Fire (Fire Separations) SS 15/3	✓
Signs for communicating information intended to facilitate evacuation SS 15/4	✓	Means of Escape from Fire (Smoke Separation) SS 15/5	✓		

M L Colman

Name of Independent Qualified Person

117358

IQP Number



Signature of Independent Qualifier Person

Date:

Form 12A- Certificate of compliance with inspection, maintenance, and reporting procedures Section 108(3) Building Act 2004

Owner of Property: Pinnacle Body Corporate 548838 **Test Date:** 18/06/2025
Mailing Address: PO Box 7077, Newtown, Wellington 6242

Contact Person: As per warrant
Phone Number: As per warrant

Device Address: 160 Victoria St, Te Aro, Wellington 6011
Legal Description of Land where building is located: LOT 1 DP 431170
Location of building within site/block number: Sprinkler Valve Room

Test Certificate – The following backflow prevention device has been tested in accordance with the Building Regulations 1992

Make: Ames **Model No:** 4000ss
Size: 100mm **Serial No:** 80662 **Type:** RPZ
New Device? YES
Device Type: Boundary
Is the installation correct? Yes

Valve Pressure Information

1 st Check	2 nd Check	Relief Opened	2 nd Shut Off Valve
65kpa	54kpa	28kpa	Passed

Pass	<input checked="" type="checkbox"/>
Fail	<input type="checkbox"/>

Testers Name: Ashley Hanrahan
IQP: 536870 **EXP:** 30/11/2025
Testing device serial number: 3P4078
Test date: 19/08/24
Re-test date: 19/08/25

Signature:

Form 12A- Certificate of compliance with inspection, maintenance, and reporting procedures Section 108(3) Building Act 2004

Owner of Property: Pinnacle Body Corporate 548838 **Test Date:** 18/06/2025
Mailing Address: PO Box 7077, Newtown, Wellington 6242

Contact Person: As per warrant
Phone Number: As per warrant

Device Address: 160 Victoria St, Te Aro, Wellington 6011
Legal Description of Land where building is located: LOT 1 DP 431170
Location of building within site/block number: Sprinkler Valve Room, bypass for main RPZ

Test Certificate – The following backflow prevention device has been tested in accordance with the Building Regulations 1992

Make: Watts **Model No:** 009
Size: 50mm **Serial No:** 07895 **Type:** RPZ
New Device? YES
Device Type: Boundary bypass
Is the installation correct? Yes

Valve Pressure Information

1 st Check	2 nd Check	Relief Opened	2 nd Shut Off Valve
59kpa	50kpa	27kpa	Passed

Pass	<input checked="" type="checkbox"/>
Fail	<input type="checkbox"/>

Testers Name: Ashley Hanrahan
IQP: 536870 **EXP:** 30/11/2025
Testing device serial number: 3P4078
Test date: 19/08/24
Re-test date: 19/08/25

Signature:

