As built drainage plan

Waitakere City Council
Te Taiao o Waitakere

Building Consent number: _____

Owner: _____

Street address: _____

Lot number: _____ DP number: _____

Drain-layer: _____ Registration number: _____

Note: Please provide figures/measurements from a defined point of reference.

Date submitted: _____

Note: Use black ink for building outline, blue ink for stormwater drains, and red ink for sanitary drains

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