

Contractor Statement of Damage

This form is for contractors to submit detailed information about missed damaged or sub-standard repairs.

Owner's name*	
Address of claim*	
Claim number*	
Your name*	
Your address*	
Your phone number	
Your email*	
Which of the following profe A licenced building pract Licence/registration number	citioner Registered building surveyor Registered engineer
	registered drain layer, plumber)
Building details:	
Please fill in all fields as best	you can
Land classification*	
Number of floors*	
Age of building*	
Type of foundation*	
Type of wall constructio	n*
Type of external claddin	g*
Type of roof*	
Type of internal wall & ceiling linings*	
Date of your inspection*	
Type of damage*	
What led to the damage being discovered?	



Missed damage Sub-standard repairs Incorrect repair strategy Tick all relevant boxes
Identify date(s) of relevant repairs and detail the repairs completed
Description of damage and cause*
Please summarise the extent of missed damage or sub-standard repairs and why you believe this damage is earthquake related. Experts must be clear on the impact caused by the Canterbury Earthquakes, if there is any uncertainty about the earthquake damage, please indicate why.
What investigations have been undertaken? (eg levels)
What is your proposed repair or remedial strategy? (If applicable) Include quote if relevant.
Is there any non-earthquake related damage evident? Please indicate what.



Do you recommend further investigation or reportin	g*?
No Structural engineer Geotechni	ical engineer Other
	-
Please provide details on the recommended investig	vation*
ricase provide details on the recommended investig	audi
Signature*	Date*
All fields marked with a * are mandatory.	
By submitting this form, you confirm you are a current lice	enced building practitioner, registered building surveyor,
registered engineer or other suitably qualified expert and	have inspected the property yourself.
Please send this signed and completed form with the requ	uested information to NHC by email or post.
Scan and email to:	Post to:
claims@natural.hazards.govt.nz	Natural Hazards Commission Toka Tū Ake
(please add claim number in subject line)	PO BOX 311, Wellington, 6140

