

# Request for discharge of encumbrance: Removal of family flat or its kitchen

Submit this form online at: [onlineservices.ccc.govt.nz](https://onlineservices.ccc.govt.nz); or

Email to: [resourceconsentapplications@ccc.govt.nz](mailto:resourceconsentapplications@ccc.govt.nz); or

Deliver to: Resource Consents Unit, Christchurch City Council, 53 Hereford Street, Christchurch; or

Send to: Resource Consents Unit, Christchurch City Council, PO Box 73014, Christchurch Mail Centre, Christchurch, 8154

For enquiries phone: (03) 941 8999 or email [DutyPlanner@ccc.govt.nz](mailto:DutyPlanner@ccc.govt.nz)

## About this form

This form should be used where the owner of a family flat wishes to discharge (remove) an encumbrance because it is no longer required by a dependant relative, and the flat has either been removed from the property or the kitchen has been removed so the flat is no longer a self-contained unit.

*Note: Please use Form [P-014b](#) instead if the family flat has been converted into a separate residential unit under Rule 14.4.1.1 P9 in the District Plan or via resource consent.*

A [fee](#) is payable when this form is submitted. We will send you an invoice with information about payment methods.

## 1. Property details

Address (including unit number):

Legal description:

Title number:

- ☐ I have provided a Record of Title showing the existing encumbrance. *This can be obtained from Land Information New Zealand:*  
<https://www.linz.govt.nz/land/land-records/order-copy-land-record/land-record-order-form>.

## 2. Requirements for encumbrance discharge

For the encumbrance to be discharged, the family flat must have either (tick one)

- ☐ Been relocated off or removed from the property; or
- ☐ Had the kitchen removed so that the family flat is no longer a self-contained unit.

A building consent is required for the relocation of the family flat from the site, or for removal of the kitchen if the building is to remain as an accessory building. The works need to be completed prior to the discharge of the encumbrance from the title.

Building consent number for the work:

Date of final inspection:

Please describe the work that has been carried out and attach photographs to demonstrate this:

### 3. Request for discharge of encumbrance

Before the Council's solicitors can discharge the encumbrance it is necessary for you to request the Council to instruct its solicitors to do this. Please sign the following clause and provide the details below, and return this form to the Council. The Council's solicitors will then prepare the encumbrance discharge and advise you/your solicitor when the discharge has been registered.

**The owner(s) has / have read, understood and accept the Council's requirements and ask the Council to instruct its solicitors to prepare the discharge of encumbrance in accordance with the above requirements.**

Full names and signatures of all registered owners of the property, including any joint owners:

|                   |  |                   |  |
|-------------------|--|-------------------|--|
| <b>Signature:</b> |  | <b>Signature:</b> |  |
| Full name:        |  | Full name:        |  |
| Date:             |  | Date:             |  |

Attach an additional page if necessary

### 4. Owner's contact details:

|                                                 |  |          |  |
|-------------------------------------------------|--|----------|--|
| Full name (including middle name):              |  |          |  |
| <b>OR</b>                                       |  |          |  |
| Registered Company / Trust / Organisation name: |  |          |  |
| Contact person / Trustee names:                 |  |          |  |
| Landline:                                       |  | Mobile : |  |
| Email:                                          |  |          |  |
| Postal Address:                                 |  |          |  |

### 5. Owner's solicitor:

|                 |  |          |  |
|-----------------|--|----------|--|
| Name:           |  |          |  |
| Name of firm:   |  |          |  |
| Landline:       |  | Mobile : |  |
| Email:          |  |          |  |
| Postal Address: |  |          |  |

### 6. Invoicing details:

|                                                       |                                |                                    |                                                |
|-------------------------------------------------------|--------------------------------|------------------------------------|------------------------------------------------|
| The invoice for the processing fee to be made out to: | <input type="checkbox"/> Owner | <input type="checkbox"/> Solicitor | <input type="checkbox"/> Other (specify below) |
| Other name:                                           |                                |                                    |                                                |
| Email:                                                |                                |                                    |                                                |
| Postal Address:                                       |                                |                                    |                                                |

### 7. Privacy information

The information on this form is required for the Council to process your request. All information submitted is required to be kept available for public record, therefore the public (including business organisations, media and other units of the Council) may view this application, once submitted. It may also be made available to the public on the Council's website. If there is sensitive information in your request please let us know.

The Council is subject to the Privacy Act 1993. For a full privacy statement see: <https://ccc.govt.nz/the-council/how-the-council-works/privacy-statement/>. If you would like to request access to, or correction of, your details, please contact us.