

**NEW ZEALAND GREEN**

**BUILDING COUNCIL**

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**Green Star – Performance NZ Project Registration Form**

|  |  |
| --- | --- |
| Date |  |

**Project Information**

|  |  |
| --- | --- |
| Name of Project: | This will appear on your Green Star Certificate |
| Type of Certification: | Single Building or Portfolio |
| Number of buildings to be included in the rating: |  |
| Has any building(s) been previously rated under Green Star? | If yes, please specify if this is as a Green Star Design/ Built rated base building or, previously certified Green Star Performance rating |
| Has any building(s) had a current NABERSNZ Energy rating? | If yes, please specify the building name, NABERSNZ rating type and certificate expiry date |
| Targeted Green Star Performance Rating? | 1 Star, 2 Star, etc. or not yet known |
| Project description: | Please include a brief description of your project including interesting attributes, innovations, amenities, tenants. |

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| Are you targeting Net Zero Buildings Certification through Green Star Performance? |
| *Note: If you tick this box, you are confirming you will submit additional information as per the Standard, Additional fees also apply. Please contact NZGBC Green Star team for more information.* |

**Building/Portfolio Owner (Applicant) Information**

|  |  |
| --- | --- |
| Name of the person who will sign off on the Green Star registration: |  |
| Organisation: |  |
| Address of organization: |  |
| Contact number: |  |
| Email address: |  |
| Billing address (if different from above): |  |

**Project Contact**

|  |  |
| --- | --- |
| Project’s main contact: |  |
| Organisation: |  |
| Contact number: |  |
| Email address: |  |

|  |  |
| --- | --- |
| Applicant Agent (e.g. GSAP, if applicable) |  |
| Organisation: |  |
| Contact number: |  |
| Email address: |  |

**Permission to Announce**

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| --- | --- |
| Do you allow NZGBC to promote\* the registration of this project? | Yes/ no |
| Upon successful achievement of the rating, do you allow NZGBC to promote\* the certification of this project? | Yes/ no |

***\*****Promotion may be in the form of a press release, announcement in the NZGBC membership newsletter, and listing the project on the NZGBC website.*

*Please note that this can be changed at any time by contacting the NZGBC.*

**Building(s) Information:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Building Name** | **Address** | **Floor Area (m2)** | **Primary Use(s)** | **Target Net Zero Buildings? (Y/N)** |
| 1 |  |  |  | e.g. office, industrial, hospital |  |
| 2 |  |  |  |  |  |
| 3 |  |  |  |  |  |
| 4 |  |  |  |  |  |
| 5 |  |  |  |  |  |
| 6 |  |  |  |  |  |
| 7 |  |  |  |  |  |
| 8 |  |  |  |  |  |
| 9 |  |  |  |  |  |
| 10 |  |  |  |  |  |

**Eligibility Check**

|  |  |
| --- | --- |
| 1. **Building Type** | |
| Please ensure the above table is completed, including primary use(s) to confirm that none of the buildings to be rated is a car-parking building, or single detached dwellings. | |
| Is there any residential component within the building(s)? | Yes/ No |
| If the answer to the above question was “yes”, please explain: | |
| 1. **Timing of Submission for Certification** | |
| Have all buildings achieved practical completion for 36 months /18 months if buildings have been certified under Green Star Built rating? | Yes/ No |
| Have all buildings to be included in the rating been operated under normal conditions for at least 12 consecutive months? | Yes/ No |
| If the answer to either of the above questions was “no”, please explain: | |
| 1. **Requirements for Best Practice Rating** | |
| Is a rating of 4 Star or higher being sought for the Project?  *If no, please skip to question 4.* | Yes/ No |
| If yes, please note that the building or Portfolio must achieve a 10% improvement upon the average greenhouse gas and potable water baselines in order to be awarded this level of rating. | |
| 1. **Distinct Boundary** | |
| Are all buildings to be included in the rating standalone, distinct buildings? | Yes/ No |
| If the answer to the above question was “no”, please explain: | |
| 1. **Minimum Occupancy** | |
| Are all buildings to be included in the rating “occupied” buildings (i.e. minimum 1 FTE occupant)? | Yes/ No |
| If the answer to the above question was “no”, please explain: | |
| 1. **Timing of Performance Period** | |
| What is the proposed Performance Period for the project?  *The “Performance Period” is 12 consecutive months. This performance period must commence no earlier than* ***15 months*** *prior to registration and end no longer than* ***24 months*** *post-registration. Project needs to submit documentation for assessment within 3 months after end of performance period.* | e.g. Aug 2016- Jul 2017 |
| If unknown, I acknowledge that the Performance Period must be identified within 90 days of the date of submission of this registration form. | Mark with “x” to acknowledge |
| 1. **Other Requirements** | |
| I confirm that the Green Star – Performance registered premises complies with all Environmental and Occupational Health and Safety Laws | Mark with “x” to confirm |
| All Green Star – Performance registered projects must commit to sharing their building energy and water usage data with NZGBC. | Mark with “x” to acknowledge |
| For Portfolio projects: I have read and understand the ‘Portfolio Certification’ section of the Submission Guidelines. | Mark with “x” to confirm |
| 1. **Building(s) seek Net Zero Buildings Certification only** | |
| I understand that upon successful achievement of the Net Zero Buildings Certification, a Public Report will be made publicly available with summary of the Net Zero Buildings certificate. | Mark with “x” to confirm |

**Certification Agreement**

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| This confirmation of Agent's Authority provided to the NZGBC will be effective upon receipt by the NZGBC of an executed copy (execution by ticking box below) of this form.  This confirmation is part of, and subject to, the [Green Star Certification Agreement](https://www.nzgbc.org.nz/Attachment?Action=Download&Attachment_id=45415) between the Applicant and NZGBC.  This confirmation applies to the project identified above under the heading "Project Information".  SCOPE OF AUTHORITY  1. The Applicant confirms that the Agent has been granted authority to accept the Certification Agreement in relation to the Project on behalf, and with the full knowledge, of the Applicant.  2. The Applicant understands that by providing this Confirmation, it will be bound by the actions of the Agent as if the same were taken directly by the Applicant.  REVOCATION OF AUTHORITY  1. The Applicant acknowledges that the NZGBC and its employees, agents, successors, and assigns will continue to rely on the representation of authority provided by this Confirmation unless and until the NZGBC receives written notice from the Owner that the authority of the Agent to act on its behalf has been revoked, and the NZGBC provides notice to the Applicant of the receipt and acceptance of the termination of authority.  2. Any termination of authority only applies to the Agent's actions taken following NZGBC's acknowledgement of the termination of the Agent's authority. |
| **EXECUTION**  **The Agent/Applicant consents to all the provisions of this Confirmation.** |

**Confirmation**

I confirm that the information on this form is accurate and true.

|  |  |
| --- | --- |
| Name: |  |
| Position: |  |
| Organisation: |  |
| Date: |  |