



COMMUNITY WASTEWATER APPLICATION (SEWER)

VG Number: <input style="width: 95%;" type="text"/>	Parcel No: <input style="width: 95%;" type="text"/>	ST <input style="width: 20%;" type="text"/> / <input style="width: 20%;" type="text"/>
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Refer Development Application number: / /

Pursuant to the SA Public Health (Wastewater) Regulations 2013, all on-site wastewater systems and alterations to on-site wastewater systems are subject to a wastewater works approval. Refer to the South Australian Department for Health and Ageing ON-SITE WASTEWATER SYSTEMS CODE (the Code) for further information to assist in the completion of this application form. The Code can be accessed online at <http://www.sahealth.sa.gov.au/wastewater/new-regulations-and-codes.htm>

Each application must be signed by both the applicant and the owner/occupier, must include **two copies** of a detailed sanitary plumbing and drainage lay-out (refer to Section 8 of the Code), a site and soil report (refer to Section 3.6.1 of the Code) and the appropriate fee as determined by the Light Regional Council.

For details regarding the fee and method of payment, please contact Light Regional Council on 8525 3200

PLEASE PRINT CLEARLY

1. LOCATION OF INSTALLATION

Street _____ Township _____

Street Number _____ Lot of Pt. Lot Number _____

2. OWNER / APPLICANT DETAILS

Owner's name _____

Owner's address _____

Township or Suburb _____ Postcode _____ Telephone _____

When the person completing this application is not the owner, please provide applicant details:

Applicant's name _____

Applicant's address _____

Township or Suburb _____ Postcode _____ Telephone _____

Tick as appropriate Builder Plumber Other (please specify)

3. PREMISES DETAILS

PREMISES DESCRIPTION (ie house, flats/units, offices etc) _____

Number of persons expected to occupy dwelling _____

4. NON-STANDARD FIXTURES TO BE INSTALLED

Food waste disposal unit Spa bath *Please state capacity (litres)* _____

Other *Provide details* _____

Council may require additional information such as hydraulic flows for other non- standard fixtures.

SOIL ASSESSMENT

Attach soil bore log report by a suitably qualified geotechnical engineer. The report must indicate the surface movement, i.e., γ_s value (Estimation of characteristic surface movement). The report shall state whether flexible connections are required; if flexible connections are recommended by engineer the drainage plan shall show locations, types of flexible connections.

NOTE* Please refer to guide sheet for minimum requirements that **MUST** accompany all applications, failure to provide requested information will result in delays processing application.

5. DECLARATION & SIGNATURE OF OWNER & APPLICANT

All work on the waste control system must be carried out by person(s) licensed pursuant to the Plumbers, Gasfitters and Electricians Act, 1995.

Please provide registration Number.._____

Penalties may apply for the provision of false or misleading information.

Where the applicant is NOT the owner, then BOTH the owner's signature and the applicant's signature are required, otherwise approval will be delayed. The owner should ensure that this form is completed BEFORE signing.

All applications must be accompanied with the appropriate fee. Please contact the Light Regional Council for details.

I / We hereby declare that the information provided in this application, attachments and accompanying plans is true and correct.

Owner's signature _____ Date _____

Applicant's signature _____ Date _____