



Locked Bag 5
Town Hall
Boorowa Street
YOUNG NSW 2594

Phone: (02) 6380 1200
Fax: (02) 6380 1299
E-mail: mail@young.nsw.gov.au

ON-SITE SEWERAGE MANAGEMENT APPLICATION

[made under the Section 68 of the
Local Government Act 1993]

A P P L I C A N T	NAME: POSTAL ADDRESS: P/C PHONE: (H) (W) I hereby apply for development consent to carry out the development described below Applicants signature & date	O W N E R	NAME: POSTAL ADDRESS: P/C PHONE: (H) (W) I/we, being the owner of the land to which this application relates, hereby consent to the making of this application. Applicants signature & date
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L A N D	No: STREET/ROAD: LOCALITY: LOT No: DP: SECTION No: PORTION No: PARISH: AREA:
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P A R T I C U L A R S	WORK: <input type="checkbox"/> New installation <input type="checkbox"/> Alteration <input type="checkbox"/> Addition <input type="checkbox"/> Registration WATER SUPPLY: <input type="checkbox"/> Rainwater <input type="checkbox"/> Reticulated Town Water <input type="checkbox"/> Bore (Groundwater) TYPE OF SYSTEM: <input type="checkbox"/> Conventional Septic Tank <input type="checkbox"/> Aerated Septic Tank <input type="checkbox"/> Composting Toilet EFFLUENT DISPOSAL AREA: <input type="checkbox"/> Absorption Trench <input type="checkbox"/> Transpiration Bed <input type="checkbox"/> Surface Irrigation SEPTIC TANK BRAND: CAPACITY: No. PERSONS USING SYSTEM: TOPOGRAPHY/SLOPE: <input type="checkbox"/> Flat <input type="checkbox"/> Undulating <input type="checkbox"/> Steep/Hilly PROXIMITY TO WATER COURSE/CREEK/DAM: m DEPTH TO GROUNDWATER (if known): m
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P L U M B E R	NAME: PLUMBERS LICENCE No: POSTAL ADDRESS: P/C PHONE: (H) (W) FAX:
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DA CONSENT DETAILS	- No:	DATE OF DETERMINATION:
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DATE RECEIVED:	RECEIPT NUMBER:	AMOUNT: \$
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