



APPLICATION TO

CARRY OUT SEWAGE WORK

Locked Bag 5
Town Hall
Boorowa Street
YOUNG NSW 2594

Phone: (02) 6380 1200
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Email: mail@hilltops.nsw.gov.au

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

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|---|----------------------------|--|----------------------------|
| A P P L I C A N T | NAME: | O W N E R | NAME: |
| | POSTAL ADDRESS: | | POSTAL ADDRESS: |
| | P/C | | P/C |
| | PHONE: (H) (W) | | PHONE: (H) (W) |
| I hereby apply for development consent to carry out the development described below | | I/we, being the owner of the land to which this application relates, hereby consent to the making of this application. | |
| | | | |
| Applicants signature & date | | Applicants signature & date | |

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| L A N D | No: STREET/ROAD: LOCALITY: |
| | LOT No: DP: SECTION No: |
| | PORTION No: PARISH: AREA: |

| | | | |
|--------------------------------------|--|---------------------------------|----------------------------|
| P R O P O S A L | TYPE OF WORK: <input type="checkbox"/> New <input type="checkbox"/> Alteration <input type="checkbox"/> Addition | P L U M B E R | NAME: |
| | PROPOSED USE OF BUILDING BEING CONNECTED: | | POSTAL ADDRESS: |
| | <input type="checkbox"/> DWELLING <input type="checkbox"/> GARAGE <input type="checkbox"/> SHED | | P/C |
| | <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> OTHER | | PHONE: (H) (W) |
| | | PLUMBERS LICENCE No: | |

| | | |
|-----------------------------------|------------------------------|--------------------------------|
| DA CONSENT DETAILS (if available) | | |
| DA CONSENT No: | DATE OF DETERMINATION: | BUILDING CLASSIFICATION: |

| | |
|---|--|
| NOTES TO APPLICANT | |
| The Contractor and/or Licensee is required to : | |
| <ol style="list-style-type: none"> Ascertain the position of services and ensure connection is possible. Give a minimum of twelve hours notice for inspection. All sewer drainage lines shall be filled for water test prior to inspection. No work is to be covered prior to inspection. | |

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| DATE RECEIVED: | RECEIPT NUMBER: | AMOUNT: \$ |
|----------------------|-----------------------|------------------|