

# WASTEWATER MANAGEMENT FACILITY – APPROVAL TO INSTALL

Local Government Act 1993 Section 68



## LODGEMENT AND PAYMENT OF APPLICATION: You can lodge and pay for your application via:



**Council:** City of Canada Bay Civic Centre, 1A Marlborough Street, Drummoyne  
8.30am-4pm, Monday-Friday – **Payment by CASH, CHEQUE OR CARD**



**Email:** [customer.service@canadabay.nsw.gov.au](mailto:customer.service@canadabay.nsw.gov.au)

A tax invoice will be sent via email for payment when your application has been accepted by Council. Payment **MUST** be made within three (3) working days of receipt of invoice and can be paid using credit card via Council's online eServices Portal: [www.canadabay.nsw.gov.au](http://www.canadabay.nsw.gov.au)



**Mail:** City of Canada Bay, Locked Bag 1470, Drummoyne NSW 1470 – **Payment by CHEQUE ONLY**

**Please note:**

Your application will **NOT** be processed until **FULL** payment has been received.  
If paying by CREDIT CARD, an additional 1.0% processing fee will apply.  
If paying by AMEX CARD, an additional 1.0% processing fee will apply.

**Office Use**

Fee Paid: \$

Receipt No:

Date:

Application Number:

## Fees & Charges (includes assessment of application and initial inspection)

Application Fee: \$210 To be paid on lodgement of this application

## Applicant Details

Please Note: Approval will be issued to property owner

Surname:

First Name:

Email:

Contact Number:

Address:

Suburb:

Postcode:

## Property Details

Address:

Suburb:

Postcode:

Lot:

DP:

## Consent of ALL Owners - Essential

Council will not accept or register the Application if the consent of the Owner(s) has not been provided

Surname 1:

First Name:

Address:

Suburb:

Postcode:

Signature:

Date:

Surname 2:	<input type="text"/>	First Name:	<input type="text"/>
Address:	<input type="text"/>		
Suburb:	<input type="text"/>	Postcode:	<input type="text"/>
Signature:	<input type="text"/>	Date:	<input type="text"/>

### Company Details (if applicable)

Where owner is a Company or Owners Corp, a Seal and/or ABN & ACN must be provided

Company Seal:	<input type="text"/>	ABN:	<input type="text"/>	ACN:	<input type="text"/>
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### Installer/Plumber Details

Business Name:	<input type="text"/>		
Surname:	<input type="text"/>	First Name:	<input type="text"/>
Phone (w):	<input type="text"/>	Phone (m):	<input type="text"/>
Licence No:	<input type="text"/>		
Email:	<input type="text"/>		

### System Details – Number Bedrooms/ Studies

Type/Name of Treatment System:	<input type="text"/>
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### Application for approval to Install a Greywater System Checklist (please tick)

#### Proposed Site Plan

Provide a plan, to scale, showing the location of:

- The dwelling in relation to the block and the proposed effluent disposal area
- The greywater treatment system proposed to be installed or constructed on the premises
- Any related greywater disposal area
- The location of any bore holes
- Any related drainage line or pipe work (whether natural or constructed)
- Connection for overflow into sewer
- Method for manual switch of greywater when disposal area has become saturated

#### Specifications

Full specifications, the Certificate of Accreditation and associated conditions of the greywater treatment system proposed are to be provided.

#### Statement of Environmental Effects

The application must be accompanied by details of the climate, geology, hydrogeology, topography, soil composition and vegetation of any related effluent application areas together with an assessment on the site in the light of those details.

Note: This does not need to be geotechnical report.

#### Effluent disposal area

Calculations which indicate an appropriately sized greywater disposal area

#### Operation and maintenance

- The operation and maintenance requirements for the proposed greywater treatment system
- The proposed operation, maintenance and servicing arrangements intended to meet those requirements
- The action to be taken in the event of a breakdown in, or other interference with, it's operation

**Fail to submit all required details may lead to council refusing the application**

**Declaration**

I have read and fully understand the Greywater Reuse Policy adopted by the City of Canada Bay. I have completed the checklist provided above and comply with all of Council's requirements. All information provided on this form is true and correct.

Owner/s Signature:

Date:

I/We own the subject land and consent council officers entering the premises for the purpose of carrying out inspections in conjunction with this application without first giving written consent.