Made under Section 68 of the Local Government 1993						
			ffice Use Only	overnment 1995		
CITY	Developm	ent App No:				
COUNCIL •	On-	-site Sewage				
		ent App No:				
	Da	te Received:				
LEGAL REQUIREMENTS REGARDING INFO	ORMATION PROVID	DED TO COUNCIL		044810.2	014 (Jul 2017)	
Council is obliged under s.6 of the Go applications (including names of applications to applications) any residential parts of a building. Pleas agents to process this application and Privacy and Personal Information Protectivity in the published on Council's web referred to Council's Privacy Contact Office.	overnment Informations and owners) and owners) and se note that the infit can be made avaition Act 1998, some osite. Information re	tion (Public Access) and any associated docormation provided by ailable, as required by a personal information	cuments on the wo y you on this forn y law, to other go n provided on this	ebsite, except for floon will be used by Co overnment agencies. If form, such as phone	or plans of uncil or its Under the numbers,	
☐ Type of system: (Please tic	k appropriate b	ox)				
☐ Transpiration/Absorptio	n Trench					
☐ Pump Out Septic Tank						
☐ Compost Toilet						
□ Grey Water Re-use						
☐ Aerated Septic Tank (Br	and)					
☐ Other (please specify)	-					
Address Details						
Shop/Unit No:	House No:				Office Use	
Street:						
Suburb:			Postco	ode:		
Lot No:	Deposited / S	trata Plan No:		Section:		
Proposed Details						
Plumber's Name:			Licence No:			
. iamber e riamer			2.001.001.101			
Plumber's Address:						
Home Phone:	Home Phone: Business Phone: Mobile:					
State whether premises is: (Tick	whichever is ap	plicable)				
☐ Dwelling ☐ Shop	☐ Factory	☐ Othe	r			
Type and Number of wastes to be connected:  Number of Persons:						
W.C. Flush capacity (Litres):  Collection Well capacity (Litres):						
			1 - 1, (=-1.0	,		
Septic Tank capacity (Litres):						
Aerated Septic Tank brand:		Source of water	r supply:			



Digital Requirements And Naming Convention							
Applications without a correctly formatted CD digital data disc or USB drives.	ve will not be accepted.	Office Use					
<ul> <li>All documents (including written documents) and plans for all application or USB and not password protected.</li> </ul>	s must be submitted on CD						
<ul> <li>Each plan and each document must be single sided and must be subr</li> <li>File and named separately e.g. Application form, floor plans, elevation p</li> </ul>							
<ul> <li>Signatures are not to be placed on supporting documents of Management Plan, Statement of Environment Effects, floor plans, site plants</li> </ul>							
Individual files for each application must not exceed 20 MB. Large files must be split into smaller size files.							
Standard documents are required under 400dpi resolution whether multipage documents and must not exceed 500MB in size.	they are single pages or						
<ul> <li>File names for the electronic file are to be titled using the naming conven where possible in alphabetical order, naming each document and plan in application form: i.e. Document Type + Property Address and saved in</li> </ul>	dividually, including the						
Example:							
Application form – 33 Moore Street Liverpool.pdf							
<ul> <li>Checklist – 33 Moore Street Liverpool.pdf</li> </ul>							
Elevation Plans – 33 Moore Street Liverpool.pdf							
Engineering Details – 33 Moore Street Liverpool.pdf  Floor Bloom 33 Moore Street Liverpool and  The Company of the Compan							
<ul> <li>Floor Plan – 33 Moore Street Liverpool.pdf</li> <li>Section Plans – 33 Moore Street Liverpool.pdf</li> </ul>							
<ul> <li>Section Plans – 33 Moore Street Liverpool.pdf</li> <li>Site Plan – 33 Moore Street Liverpool.pdf</li> </ul>							
Specifications – 33 Moore Street Liverpool.pdf							
Amended Plans / Supply of Additional Information							
ST Number – Additional Information – 33 Moore Street Liverpool.pdf							
Does the CD or USB contain files which are named correctly and the content exa	ctly matches all						
hardcopies and documents submitted with this application?  Yes D No							
☐ Yes ☐ No							



Documentation Checklist  Note: Pages 3 – 5 are not available for viewing on Council's website		
Copies of documents required:	Office	
3 hardcopies of all plans and documents are required as detailed on the checklist	Use	
Digitalised CD or USB is required for all applications. Please note that Council is unable to	i	
accept this application without a digitalised CD or USB, in the required format attached.	ı	
Site, floor, elevation, section plans and drawings must include the following:	i	
Plans to scale 1:100, 1:200  Plans are to be A2 size and severe.		
Plans are to be A3 size or larger  Assume to locality of loca	1	
<ul> <li>Accurate locality sketch showing nearest cross streets</li> <li>Existing ground contours/existing and proposed levels</li> </ul>	1	
<ul> <li>Existing ground contours/existing and proposed levels</li> <li>Distance of buildings and other structures from all boundaries</li> </ul>		
<ul> <li>Position of all fittings and drainage lines</li> </ul>		
<ul> <li>Position of an intings and drainage lines</li> <li>Position of septic tank and absorption trenches and/or collection well in relation to buildings and</li> </ul>		
waterways/dams and property boundaries		
Position of all other disposal trenches or pits	1	
When installing an Aerated Septic Tank, full details to be shown of the irrigation system and the	1	
area to be irrigated	1	
North point and site address		
Date		
Description of plan/drawing		
Architect/designer name and contact details	1	
Number each set of plans eg 1 of 10	1	
Number and brief description of amendments     Capies of plans are to be folded to A4 size with a title black on the front.		
<ul> <li>Copies of plans are to be folded to A4 size with a title block on the front</li> <li>Levels to Australian Height Datum (AHD).</li> </ul>	1	
<ul> <li>Trees on subject and adjoining properties are to be shown</li> </ul>		
<ul> <li>Personal details are not to be placed on plans or documentation</li> </ul>		
1 croonal actails are not to be placed on plane of accumentation		
Septic Tank plans		
(a) Detailed plans of the On-site Sewage Management system proposed to be installed or constructed		
on the premises including the NSW Department of Health Accreditation Certificate for the system		
(b) Operation and maintenance (required for AWTS) details of:		
(i) The operation and maintenance requirements for the proposed sewage management	1	
facility, and (ii) The proposed operation, maintenance and servicing arrangements intended to meet those	1	
requirements		
(iii) The action to be taken in the event of a breakdown in, or other interference with, its		
operation	1	
The application must be accompanied by three (3) copies of a site specific, comprehensive Waste Water/		
Geo-technical Report undertaken by a suitably qualified Waste Water Engineer or Consultant. The report		
must be designed in accordance and meet the requirement of:	1	
(a) Council requirements		
(b) The Department of Local Government "Environment and Health Protection Guidelines: On-site Management for Single Households" and		
(c) "Part 2, Division 4 – Approvals Relating to the Management of Waste – Local Government		
(General) Regulation, 2005		
(d) AS/NZS: 1547.2012	ı	
	i	
Owner's consent is required with the application.		
Failure to carry out these instructions will lead to the rejection of this application.		
All requirements have been checked and provided?	Ц	
☐ Yes ☐ No		



Applicant's Details And Decl NOTE: Pages 3 - 5 are not	aration available for viewing on Council's webs	ite		
Family Name(s)/Surname(s) (or company & ACN):				
Full Given Names or Compan	y Contact Person:			
House/Unit No:	Street:			
Suburb:		Postcode:	-	
Home Phone:	Business Phone:	Mobile:	-	
Fax:	Email:			
Applicant(s) Declaration				
I/we declare that all required documentation has been provided and is to an acceptable standard and all the information in the application and the checklist submitted are, to the best of my/our knowledge, true and correct.   Yes  No				
Signature(s):		Date:		
Print Name(s)				



Owner's Consent And Declaration  Note: Pages 3 – 5 are not available for viewing on Council's website						
Family Name(s)/Surname(s) (or company & ACN):				Office Use		
Full Given Names or Company Contact Person:						
House/Unit No:	Street:					
Suburb:		Pos	stcode:			
Home Phone:	Business Phone:	Mol	oile:			
nome Phone.	business Phone.	IVIOI	olle.			
Fax:	Email:					
Owner(s) Declaration  I/we own the subject land, consent to this application and consent to Council officers entering the premises during normal office hours for the purpose of conducting inspections relative to this application. I/we accept that all communication regarding this application will be through the nominated applicant.   Yes  No						
Signature(s):		Dat	e:			
Print Name(s)						
Owner(S) Consent Requirem						
attach documentary evidence e Strata Title/Body Corporate – If signature, the following must be (a) Common seal of the Body or secretary of the Body C  If the property has been recentl from your solicitor confirming se	ne owner as the owner's legal representative, you rule.g. Registration of Power of Attorney, executor, trule the property is a unit under strata title or a lot in a common provided if any works are proposed on common proporate must be stamped on this form over the storporate y sold, documentary evidence of the sale must be pattlement or the previous owner(s) providing owner.	stee et commu property signatu provide	c. nity title, t /: re of the o ed such as	hen in add	dition to the ow	ner's chairman
Miscellaneous Details						
Does Council require your pre			Yes		No	
Is there a dog on the property?			Yes		No	
Is there a swimming pool on the			Yes		No	
Do you consent to receiving fu	rther information requests via email?		Yes		No	



Installation Firm -			ration ewing on Council's	website			
Family Name(s)/Su				WOODONG			Office Use
Full Given Names	or Compan	y Contac	ct Person:				
House/Unit No: Street:							
Suburb:	Suburb:			Postcode			
Home Phone:		Busines	ss Phone:		Mobile:		
Fax:		Email:					
Installation Firm's D I/we declare that I/we      Yes		allation Fi	rm for the relevant	system on th	ne property (	outlined above.	
Signature(s):  Date:							
Print Name(s)			Office Use On	ly:			
Fee Type AP/MISC/ST	Application	on	\$	Receip	ot No.	Date	
Septic Tank Fee - Residential - Commercial							
TOTAL							
SUMMARY OF FEE	S						
Residential Annual Admin C Re-Inspection - Domestic OSMS Domestic Grey \ Alteration to OS	per syster Installation Water Syste	n n Packag em Instal	ge lation Package			\$ 85 \$ 125 \$ 880 \$ 1 200.00 \$ 440	
	per syster MS Installa ey Water S	n tion Pack ystem Ins	kage – under \$ 20 stallation Packag		20 000	\$ 210 \$ 125 \$ 1 200.00 \$ 2 200.00 \$ 1 200.00	