

Hawkesbury City Council

366 George Street (PO Box 146) Windsor NSW 2756 DX 8601 WINDSOR
Phone: (02) 4560 4444 Facsimile: (02) 4587 7740 Email: council@hawkesbury.nsw.gov.au



Application to install/amend an On-site Sewage Management Facility

Office Use Only

DA No:	
CDC No:	
Fees:	
Date:	
Receipt No:	

Made under Section 68, Local Government Act 1993

Type of System - place a tick in one or more boxes

- | | |
|-------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|
| <input type="checkbox"/> Aerated wastewater treatment system
With land disposal (irrigation) | <input type="checkbox"/> Septic tank with land disposal (eg ab trench) |
| <input type="checkbox"/> Septic tank with tanker pump-out | <input type="checkbox"/> Amendment to existing system |
| <input type="checkbox"/> Greywater treatment system | <input type="checkbox"/> Biological filtering system (eg wet composting) |
| <input type="checkbox"/> Septic tank and Mound | |
| <input type="checkbox"/> Other (Please specify) | <input type="text"/> |

Description of On-site System

- | | |
|--------------------------------------|-------------------------------------|
| <input type="checkbox"/> Residential | <input type="checkbox"/> Commercial |
|--------------------------------------|-------------------------------------|

Estimated cost (Commercial System Only)

(i.e: treatment system and associated land application area)

\$

Property Description

No. Street
Suburb Lot DP or SP

For Centralised Sewage Treatment Plant (Subdivision Only)

Number of lots connecting to the system

Applicant's details

Name/Company

All Correspondence will be directed to the Applicant. Applicant name will appear on consent/certificate.

Postal Address

Contact Name Contact Phone Number

Email address

- I require determination documents in hardcopy. I understand a printing and postage fee applies and I will be contacted prior to the release of these documents to confirm this fee.

Signature Date

Please complete over



Owner's details

Name	<input type="text"/>		
Address	<input type="text"/>		
Email address	<input type="text"/>		
Daytime Phone No.	<input type="text"/>	Mobile	<input type="text"/>
Fax	<input type="text"/>		

Permission to Enter Property

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

Signature	<input type="text"/>	Date	<input type="text"/>
-----------	----------------------	------	----------------------

Installer's details

Company Name	<input type="text"/>		
Address	<input type="text"/>		
License No.	<input type="text"/>	Daytime Phone No.	<input type="text"/>
Mobile	<input type="text"/>	Fax	<input type="text"/>
Email:	<input type="text"/>		
Signature	<input type="text"/>	Date	<input type="text"/>

Wastes to be connected	<input type="text"/>	No. of bedrooms (incl. study)	<input type="text"/>
Manufacturer of System	<input type="text"/>	Certificate of Accreditation No.	<input type="text"/>
Number of persons (commercial systems only)	<input type="text"/>	Effluent disposal method	<input type="text"/>
Water Source	<input type="checkbox"/> Tank	<input type="checkbox"/> Reticulated supply	<input type="checkbox"/> Dam/River/Bore/Creek
Water saving devices	<input type="checkbox"/> Nil	<input type="checkbox"/> Standard	<input type="checkbox"/> Full
Type of Waste	<input type="checkbox"/> Human Waste	<input type="checkbox"/> Trade Waste	<input type="checkbox"/> Other



Information Required

Completion of application form

All details on the application form are mandatory and are required to be completed and be accurate.

Plans

- a) The application must be accompanied by **two** copies of plans to scale, showing the location of:
- b) The dwelling in relation to the block and proposed effluent disposal area;
- c) The sewage management facility proposed to be installed or constructed on the premises;
- d) Any related effluent disposal areas;
- e) The location of any bore holes;
- f) Any buildings or facilities existing on, and any environmentally sensitive areas of, any land located within 100 metres of the sewage management facility or related effluent disposal areas;
- g) Any related drainage lines or pipework (whether natural or constructed);
- h) The location of any existing system of sewage management and effluent disposal area (if applicable); and
- i) Show all contours of the land.

Has all the above mentioned information been supplied? Yes No

Specifications

The application must be accompanied by **two** copies of full specifications of the sewage management facility proposed to be installed or constructed on the premises concerned, including a full copy of any NSW Health Certificate of Accreditation and associated conditions which can be found on the NSW Health website www.health.nsw.gov.au

Site Assessment

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

Effluent disposal area

Calculations as to the sizing of the disposal area.

Compliance requirements

The application must comply with:

- a) Local Government (General) Regulation 2005;
- b) Australian Standard 1547:2012 – On-site Domestic wastewater Management; and
- c) Hawkesbury City Council Development Control Plan Part C, Section 7 – Effluent Disposal.

Privacy Notice

Council is bound by the provisions of the Privacy and Personal Information Protection Act 1998, in the collection, storage and utilisation of personal information provided in this form. Accordingly, the personal information will only be utilised for the purposes for which it has been obtained and may be available for public access and/or disclosure under various NSW Government legislation.