

## APPLICATION FORM

## TO INSTALL / ALTER AN ONSITE WASTEWATER SYSTEM

**PRIVACY COLLECTION STATEMENT**: Your personal information is being collected by Council for consideration of your application for the above purpose. Your information will be stored in Council's Customer Database and used to identify you when communicating with Council and for the delivery of services and information. For further information on how your personal information is handled, visit Council's Privacy Policy at <a href="https://www.wyndham.vic.gov.au/privacy-policy">https://www.wyndham.vic.gov.au/privacy-policy</a>.

I hereby apply for permission to INSTALL / ALTER an onsite wastewater system as per the **Environment Protection Act 1970** and supply the following:

Environment Potestion Act 1970 and supply the following.					
PROPERTY LOCATION of proposed or existing system					
Lot No:			Street No:		
Street Name:					
Suburb:			Postcode:		
OFFICE USE ONLY	ate:	Red	ceipt no:	Н	LS/
OWNE	R DETAILS		APPLICANT DETAILS (if not owner)		
Name:		Name:			
Postal Address:			Postal Address:		
Phone:		Phone:			
Mobile:		Mobile:			
Email:		Email:			
	ER DETAILS		DRAINER DETAILS		
(Responsible for installation of tank)			(Responsible for drainage/ disposal system)		
Name:		Name:			
Postal Address:			Postal Address:		
Mobile:		Mobile:			
Licence/Registration No:		Licence/Registration No:			
PROPERTY DETAILS - please specify the number of each					
Property Type: DOMESTIC COMMUNITY FACI		ILITY COMMERCIAL	Ma	ax Occupants:	
Bedrooms:	Study:		Bathrooms:		Showers:
Basins:	Baths:		Sinks:		Troughs:



PROPERTY DETAILS - please specify the number of each						
Toilets:		Bi	Bidets:		Spa (include water capacity):	
Water supply (circle selection)				Water fixture type (circle selection)		
Mains	Tank	Roof	Bore	Other	Standard water reduction	Full water reduction

SYSTEM DETAILS – complete relevant section			
SEPTIC TANK	TREATMENT PLANT		
Material: PRECAST or CAST IN-SITE	Make and Model:		
Capacity in Litres:	EPA Approval No:		
Type of waste: ALL or GREY or OTHER	Type of waste: ALL or GREY or OTHER		

DISPOSAL DETAILS - please complete for disposal method used				
DISPOSAL METHOD	LENGTH (m)	WIDTH (m)	TOTAL AREA (m²)	
Absorption trench				
Evaporation/Transpiration bed				
Irrigation - subsurface				
Other:				

## PLANS AND SPECIFICATIONS – 3 copies of each required: NB: Any omissions may cause delays, relocation of drains, and possible additional expense. **Certificate of Title** for the property **Locality Plan** that clearly shows: ✓ the property/lot number and name of all streets which abut the property √ the dimensions of all boundaries **Building Floor Plan** drawn to scale 1: 50 that clearly details: ✓ all bedrooms, studies, amenities and kitchen areas ✓ show dimensions, grades and the location of all plumbing fittings √ how all pipe work connects to the septic or treatment tank **Block Plan** that clearly shows: ✓ The location, layout and dimensions of the proposed treatment and disposal area ✓ The location of all system components (rotars, flush valves, distribution pits, etc.) ✓ Setback distances from all components of the waste disposal system to the property and any sheds, swimming pools, driveways, dams, bores, streams, rivers, water tanks, easements, etc. on the property. ✓ The fall of the land on the property ✓ The direction of North The designated alternative disposal area to enable future duplication.

NOTE: A Certificate of Compliance is to be submitted to Wyndham City for installation.



OWNER TO COMPLETE	APPLICANT TO COMPLETE	
I am the owner of this land. I have seen and	I declare that all information contained in this	
consent to this application.	application is true and correct.	
Signature of Owner:	Signature of Applicant:	
Date:	Date:	
Septic Tank New Application \$676.00	Septic Tank Alterations \$187.00	
Receipt No:  Date Paid:	Receipt No:  Date Paid:	