

APPLICATION FORM

TO INSTALL / ALTER AN ONSITE WASTEWATER SYSTEM

I hereby apply for permission to INSTALL / ALTER an onsite wastewater system as per the **Environment Protection Act 2017** and supply the following:

PROPERTY LOCATION of proposed or existing system					
Lot No:		Street No:			
Street Name:					
Suburb:		Postcode:			
		i e			
OFFICE USE ONLY Dat	e:	Rec	eipt no:	Н	ILS/
OWNER I	DETAILS		APPLICANT DETAILS (if not owner)		
Name:			Name:		
Postal Address:			Postal Address:		
Phone:			Phone:		
Mobile:			Mobile:		
Email:			Email:		
PLUMBER DETAILS (Responsible for installation of tank)			DRAINER DETAILS (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			LITY COMMERCIAL Max Occupants:		
Bedrooms:	Study:		Bathrooms:		Showers:
Basins:	Baths:		Sinks: Troughs:		Troughs:
Toilets: Bidets:		Spa (include water capacity):			



PROPERTY DETAILS - please specify the number of each						
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 Certificate of Conformance 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:				

DIAN	IC AND C	PECIFICATIONS			
		PECIFICATIONS			
MR:	B: Any omissions may cause delays, relocation of drains, and possible additional expense.				
	Certificate of Conformity confirming that the proposed on-site wastewater treatment plant				
	meets the appropriate standard. This should be obtained from the manufacturer.				
	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 \$776.00	Septic Tank Minor Alterations \$591.00
NOTE*: Complex applications may attract an	NOTE*: Complex applications may attract an
additional per hour fee of \$96.00	additional per hour fee of \$96.00
Receipt No:	Receipt No:
Data Baid.	Data Baid
Date Paid:	Date Paid:

SEPTIC TANKS – ADDITIONAL FEES				
Septic Tank Amend Permit	\$165.00			
Septic Tank Renew a Permit	\$131.00			
Septic Tank Exemption	\$232.00			
Septic Tank Exemption Fee Per Hour	\$94.00			
Septic Tank Transfer of Permit should the property change ownership prior to completion	\$157.00			

How to lodge your application

By email	In person	By mail
mail@wyndham.vic.gov.au	Wyndham City Council 45 Princes Hwy Werribee VIC 3030 8.00am to 4.30pm Monday to Friday	P.O Box 197 Werribee VIC 3030

If you need to speak with us, please call 1300 023 411 to be transferred to the relevant department.