



Please **complete** form and **deliver** or **fax** to Port Stephens Council

<b>Type of Work</b>	<b>OFFICE USE ONLY</b>
<input type="checkbox"/> Install New System <input type="checkbox"/> Alter Existing System <input type="checkbox"/> Approval to Operate only	Application No Date of Receipt

<b>Property Description</b>			
Lot No	<input style="width: 90%;" type="text"/>	DP	<input style="width: 90%;" type="text"/>
House No	<input style="width: 100%;" type="text"/>		
Street	<input style="width: 100%;" type="text"/>		
Town	<input style="width: 100%;" type="text"/>		

<b>Property Details</b>			
Property Size	<input type="checkbox"/> less than 2000m <sup>2</sup>	<input type="checkbox"/> 2000 - 4000m <sup>2</sup>	<input type="checkbox"/> more than 4000m <sup>2</sup>
Property Use	<input type="checkbox"/> Residential Dwelling	<input type="checkbox"/> Rental Dwelling	<input type="checkbox"/> Commercial/Industrial
Water Supply	<input type="checkbox"/> Mains (Town)	<input type="checkbox"/> Tank	<input type="checkbox"/> Dam/River/Creek/Bore
Type of Waste	<input type="checkbox"/> Human	<input type="checkbox"/> Trade	<input type="checkbox"/> Other:

<b>On-Site Wastewater Management System Details</b>			
Type of Treatment System	<input type="checkbox"/> AWTS	<input type="checkbox"/> Septic Tank	<input type="checkbox"/> Effluent Pump-Out
	<input type="checkbox"/> Composting/Biological	<input type="checkbox"/> Media Filter	<input type="checkbox"/> Other:
Method of Disposal	<input type="checkbox"/> Subsurface Irrigation	<input type="checkbox"/> Raised Mound	<input type="checkbox"/> Absorption Trench
	<input type="checkbox"/> Evapo-Transpiration	<input type="checkbox"/> Other (specify):	
No Persons Using System:	<input style="width: 100%;" type="text"/>		
No of Toilets:	<input style="width: 50%;" type="text"/>	No of Bedrooms:	<input style="width: 50%;" type="text"/>
No of Urinals:	<input style="width: 50%;" type="text"/>	No of Showers:	<input style="width: 50%;" type="text"/>
No of Basins:	<input style="width: 100%;" type="text"/>		
Tank Capacity (Litres)	Tank No 1:	Tank No 2:	Tank No 3:
<input style="width: 50%;" type="text"/>	<input style="width: 50%;" type="text"/>	<input style="width: 50%;" type="text"/>	<input style="width: 50%;" type="text"/>

<b>Applicant's Details</b>	
Name:	<input style="width: 80%;" type="text"/>
Address:	<input style="width: 100%;" type="text"/>
	<input style="width: 60%;" type="text"/> Contact Phone No: <input style="width: 40%;" type="text"/>

<b>Owner/s Details</b>	
Name:	<input style="width: 80%;" type="text"/>
Address:	<input style="width: 100%;" type="text"/>
	<input style="width: 60%;" type="text"/> Contact Phone No: <input style="width: 40%;" type="text"/>

<b>Installation Firm Details</b>	
Name/Company:	<input style="width: 80%;" type="text"/>
Address:	<input style="width: 100%;" type="text"/>
	<input style="width: 60%;" type="text"/> Licence No: <input style="width: 40%;" type="text"/>
Contact Phone No	<input style="width: 100%;" type="text"/>

# Application for approval to install, alter or construct a Waste Treatment Device

## Section 68 Part C (5) – Local Government Act, 1993

### DECLARATION & SIGNATURE OF OWNERS & APPLICANT

- The undersigned hereby makes application for the approval of Council to the plans and specifications of a proposed on-site sewage management system and agrees to comply with the requirements and conditions that may be stated on the approval.
- By the submission of this application the undersigned authorises the appropriate staff of Port Stephens Council to enter the subject property for the purposes of assessing the application for compliance. Access may be made in your absence and without prior notification.
- I indemnify the Council of Port Stephens against any claim which may arise either from negligence or otherwise as a result of my carrying out or entrusting a third party to carry out the above work or any other work within the road reservation at the address of this property.
- No work or activity is permitted to be undertaken until such time as Council has granted an "Approval to Install".

Signature of Applicant:

Signature of Owner

Signature of Owner

Where Applicant is not the owner, owner(s) must sign to consent to the lodging of the application

# Application for approval to operate a System of Sewage Management

## Section 68 Part F - Local Government Act, 1993

### DECLARATION & SIGNATURE OF OWNERS & OPERATOR

The undersigned hereby makes application for the approval of Council to operate a system of sewage management in the Port Stephens Council Area and agrees to comply with the requirements and conditions that may be stated on the approval. The undersigned acknowledges that the system must not be operated until such time as an "Approval to Operate" has been issued by Council.

Signature of Operator

Signature of Owner

Signature of Owner

Where operator is not the owner, owner(s) must sign to consent to the lodging of the application

### All applicants for Installation Approval must submit with this Application the following:

1. General Requirements for all wastewater systems:
  - Manufacturer's specification of the tank(s) (indicating NSW Dept Health Accreditation);
  - A copy of the floor plan of any building to be connected to the waste treatment device;
  - Scaled (1:500) site plan indicating location of tank(s) and buildings on the property.
2. Where there is on-site disposal of effluent, applicant should also supply in addition to section 1 above:
  - Scaled site plan (1:500) indicating:
    - Location of tank(s);
    - Location of boundaries, buildings, swimming pools, paths, groundwater bores, dams and waterways;
    - Location of primary and reserve disposal areas;
    - Location of stormwater diversion drains and earth bunds (if applicable).
  - A fully completed Site Assessment Report (form available through Council or from the Council Web Site). This report is applicable to properties identified as a low or medium hazard class. It is not suitable for properties identified as high or very high.
  - Any other information requested by Council deemed to be relevant to the assessment of this application.
3. Where an aerated system is to be used applicant should also supply in addition to sections 1 & 2 above:
  - Detailed design plans and information for the irrigation pipework within the disposal area;
  - A signed service maintenance agreement.

### Application fees must be paid on submission of this application.

For fees payable please refer to Council's Fees & Charges Schedule - available on Council's Web page – [www.portstephens.nsw.gov.au](http://www.portstephens.nsw.gov.au)

### Submit

Please return your completed and signed form along with relevant fee to:

In person/mail

Customer Relations  
Port Stephens Council Administration Building  
PO Box 42 Raymond Terrace NSW 2324

