



# APPLICATION TO CONNECT TO COUNCIL SEWERAGE SYSTEM

KYOGLE COUNCIL: PO Box 11 Kyogle 2474

Ph: (02) 66321611 Fax: (02) 66322228

Note: All works are to be carried out in accordance with the Local Government Act 1993, and its regulations.

APPLICANT'S NAME \_\_\_\_\_

APPLICANT'S POSTAL ADDRESS \_\_\_\_\_

BRIEF DESCRIPTION OF WORK or Development Application No: \_\_\_\_\_

**DETAILS OF PROPERTY TO BE CONNECTED:**

STREET ADDRESS \_\_\_\_\_

LOT No \_\_\_\_\_ SECTION No \_\_\_\_\_ DP No \_\_\_\_\_ ASSESSMENT \_\_\_\_\_

OWNERS NAME \_\_\_\_\_

OWNERS POSTAL ADDRESS \_\_\_\_\_

**PLEASE INCLUDE DETAILS OF WORK BELOW OR ATTACH PLANS IF APPROPRIATE**

**INSPECTION DETAILS:**

COUNCILS INSPECTING OFFICER \_\_\_\_\_

DATE INSPECTED \_\_\_/\_\_\_/\_\_\_

PLUMBERS NAME \_\_\_\_\_

LICENCE NUMBER: \_\_\_\_\_

SEWER WORKS APPROVED? YES / NO SIGNED

**2017/18 FEES:**

APPLICATION TO CONNECT TO SEWERAGE SYSTEM	\$221 (GST not applicable)	Job No. 31000.130.220
CONSTRUCTION OF NEW SERVICE CONNECTIONS	At cost plus 22% admin (GST not applicable)	Job No. 31000.130.220
SUPPLY OF SANITARY DRAINAGE DIAGRAM	\$28 (GST not applicable)	Job No:31000.130.220

**OFFICE USE ONLY:**

Date Received.....Date Connected.....

Assessed Fee \$.....Authorised by .....

Receipt No .....DA No:(if applicable).....

# KYOGLE COUNCIL SEWERAGE CONNECTION APPLICATION CHECKLIST

