

APPLICATION FOR CONNECTION or MODIFICATION TO WATER/SEWER

Applicant Details

Owner's Name:	
Applicant's Name:	
Postal Address:	
Phone/Mobile:	Email:
Applicant(s) Signature:	Date:

Description of Land

Site Address:		
Lot No:	DP:	Section:
Parish:	County:	Area (size):

Type of Works

<input type="checkbox"/> New water service connection	<input type="checkbox"/> Disconnect existing service
<input type="checkbox"/> Relocate/modify existing service	
<input type="checkbox"/> New sewer service connection	<input type="checkbox"/> Other details: _____ _____

*Fees and charges will be calculated as per Council's current Fees and Charges.

I hereby acknowledge that the above information has been read and checked by myself and represents the property on which I wish Cootamundra-Gundagai Regional Council to carry out the above works.

Note: A Sketch must be provided on the reverse side of this form showing the required position of the service in relation to the boundaries of the land.

Office Use Only

Date Service Connected: _____ Date Meter Installed: _____
 Meter Number: _____ Reading of Meter: _____
 Signature of Plumber: _____ Size and Make of Meter: _____
 Double Check Valve: _____ Fitted Yes / No
 Serial No: _____
 Amount Paid: \$ _____ Certificate No.: _____
 Receipt No: _____ Date: _____ Cashier's Initials: _____

Privacy Statement

The information and personal details provided by you on this Form are managed in accordance with the *Privacy and Personal Information Protection Act 1998* and Cootamundra-Gundagai Regional Council's policies and procedures as outlined in Council's *Privacy Management Plan*. Should you choose not to provide this information (wholly or in part) this may impact upon consideration of the matter by Council. The information will ultimately be stored in Council's records system.