



ADMINISTRATION CENTRE:
 Lamerton House
 Lamerton Crescent
 Shellharbour City Centre
 PO Box 155, Shellharbour City Centre
 NSW 2529
 PHONE: 02 4221 6111
 FAX: 02 4221 6016
 DX 26402 Shellharbour City Centre
 EMAIL: records@shellharbour.nsw.gov.au
 WEB: www.shellharbour.nsw.gov.au

SEWAGE MANAGEMENT FACILITY
APPLICATION TO INSTALL AND OPERATE
 Local Government (Approvals) Regulation 1999

(Office Use Only): Application No..... Property No.
 Site Area: Catchment:

Application To: Install: Operate:
 Premises: Lot Hse. No..... Street..... Locality
 Name of Owner:.....
 Telephone: Business: Home:

Owners consent: I/We hereby consent to the lodgement of this application and consent to Council entering my land for the purpose of inspection.

Signature of owner(s):..... Date:

Description of Sewage Management Facility

Septic Tank (Absorption Trenches): A.W.T.S:
 Septic Tank (Pump Out): Other:
 No. of Persons (Design Capacity of System):
 Water Supply (eg. tank, bore):

Location of Management Facility

Describe location of tanks and location of effluent disposal area, eg. "20 metres North East from residence".
 Location of Tanks:.....
 Location of Disposal Areas:

Documents to Accompany this Application [Clause 28 (2-6)]

- (1) **Plan.** The application must be accompanied by two copies of a site plan, to scale, showing the location of:
 - (a) the sewage management facility proposed to be installed or constructed on the premises, and
 - (b) any related effluent application areas, and
 - (c) any buildings or facilities existing on, and any environmentally sensitive areas of, any land located within 100 metres of the sewage management facility or effluent application areas.

- (2) **Specifications.** The application must be accompanied by full specifications of the sewage management facility proposed to be installed or constructed on the premises concerned.
- (3) A full site assessment in accordance with Clause 28(4) (for operation only, this is not required).
- (4) Details of operation and maintenance requirements and arrangements for the system in accordance with Clause 28(6).
- (5) Details of the proposed system, manufacturer, model, State Health Department Approval No, capacity.

I hereby certify that all information given above is true and correct and that the soil sample referred to in soil assessment was taken from the proposed disposal site and is a true representation of the soil type in that area.

Applicant: Name/Company:

Address:

Telephone:

Signature of Applicant: Date:

(Code: 20)

Fees:	Install & Operate:	\$200.00	<input type="checkbox"/>
	Inspection only:	\$ 90.00	<input type="checkbox"/>
	Install, Operate & Inspect:	\$290.00	<input type="checkbox"/>

Receipt No: Date:

NOTE: A person who operates a system of sewage management without having obtained the prior approval of Council is guilty of an offence. (Maximum penalty 20 penalty units) (LGA 1993 CI 626 (3))

If an owner or occupier of land is the holder of an approval to operate a system of sewage management, any other owner or occupier of that land may operate the system in accordance with the conditions of approval. Local Government (Approvals) Regulation 1993 (Clause 95H).

Your Privacy

Shellharbour City Council respects your privacy at all times. When processing your application we collect personal information about you for the primary purpose of providing you with a high level of customer service.

For more information please see our Privacy Management Plan on our website www.shellharbour.nsw.gov.au or contact our Privacy Officer on (02) 4221 6111. Information leaflets are also available at all offices and libraries.