MANSFIELD SHIRE

Application for Septic Tank System

Office Use Only
File No.: .....
App No.: .....
Assess No.: A……

I hereby apply for permission to INSTALL / ALTER a septic tank system

Property Address	No.:	Lot No.:	PS / LP:
	Street:		Locality:
	Description of site (i.e. distance to nearest road intersection, access - locked gate, key available, pin code, etc.)		

Owner	Name:	
	Address:	
	Phone:	E-mail:

Applicant	Name:	Registration No.:
	Address:	
	Phone:	E-mail:

Contractor / Drainer	Name:	Registration No.:
	Address:	
	Phone:	E-mail:

Plumber	Name:	Registration No.:
	Address:	
	Phone:	E-mail:

No. of persons expected to use system:	No. of bedrooms:
Type of premise: ☐ House ☐ Holiday House ☐ Other:	Is reticulated water available? Yes ☐ No ☐

Type of system and/or process proposed:
☐ Septic Tank - subsoil proposal ☐ Package Treatment Plant ☐ Other: _____

Method of effluent disposal:
☐ Subsoil on-site ☐ Slotted pipe - length _____ m X width 0. _____ m
☐ Re-use of waste waters ☐ Other EPA Approved method : _____

Liquid capabilities of tanks, chambers or pump wells in litres (L):

Land Capability Report provided by:

Number of water closets and other fixtures to be connected to the system:

____ Water closets ____ Sinks ____ Basins ____ Baths (if spa, list capacity _____ L)
____ Waste Disposal Units ____ Troughs ____ Showers ____ Other (please specify) _____

IMPORTANT: A plan detailing the proposal, an LCA and fee must accompany this application.

I certify that to the best of my knowledge all information contained in this application is true and correct:

Applicants signature: _____ Date: _____/_____/_____
(Owner / Authorised Agent)

OFFICE USE: Fee Paid: $ _____ Receipt No.: _____ Date: _____/_____/_____