

## REQUEST FOR ON-SITE SYSTEM INSPECTION

### Property Details

Address (Unit/House No. and Street): \_\_\_\_\_

Armidale     Other location: \_\_\_\_\_

### Applicant Details

Full name of contact person: \_\_\_\_\_

Company name (if applicable): \_\_\_\_\_

Postal address: \_\_\_\_\_

Contact details (home/mobile phone): \_\_\_\_\_

Email: \_\_\_\_\_

**Owner's consent:** I/we the owner(s) of the above property request Armidale Regional Council to perform an inspection of On-site Waste Water System on the premises detailed above.

Signatures of **all** owners: \_\_\_\_\_

\_\_\_\_\_

### On-site System Location (provide a diagram of the On-site system in relation to the house)

#### Notes:

- a) A Council Officer will contact the applicant once payment has been made to organise a time for inspection.
- b) Please inform the Council officer if there are any dogs/animals on the premises when booking the inspection.
- c) The Officer will then inspect the premises and either issue an approval to operate or issue a notice of works that are required.
- d) For rental properties, it is the responsibility of the owner/agent to inform the occupiers of the inspection.

Council use only			
Council Licence No: <b>OSSM/</b>		Communication data entered in Pathway <input type="checkbox"/>	
Fee \$180.00	Receipt Code <b>A295</b>	Receipt No.	Date