

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: OSSM/		Communication data entered in Pathway <input type="checkbox"/>	
Fee \$175.00	Receipt Code A295	Receipt No.	Date