APPLICATION TO CONSTRUCT OR INSTALL AN APPARATUS FOR THE TREATMENT OF SEWAGE



HEALTH (MISCELLANEOUS PROVISIONS) ACT 1911 HEALTH (TREATMENT OF SEWAGE AND DISPOSAL OF EFFLUENT AND LIQUID WASTE) REGULATIONS 1974

APPLICATION TYPE

This Application to Construct or Install an Apparatus for the Treatment of Sewage is intended for wastewater systems servicing a <u>single dwelling OR</u> systems expecting <u>volumes under 540L of sewage per day</u>.

Applications that do not fit into either category must complete an Alternative Department of Health Application

Applications that do not fit into either category must complete an <u>Alternative Department of Health Application</u> to submit to the Shire of Mundaring.

LOCATION OF SYSTEM				
Lot Number				
Street Number				
Street Name				
Town or Suburb				
OWNER / APPLICANT DETAI	LS			
Owner's Name				
Applicant's Name				
Applicant's Postal Address				
Suburb	Postcode:			
Applicant's Phone Number				
Applicant's Email Address				
PREMISES DETAILS (RESIDENTIAL PREMISES ONLY)				
Number of Bedrooms				
Number of Persons on Premises				
Number of Dwellings on Lot				
Is this an Ancillary Accommodation?	□ No□ Yes → Shire Planning Approval Required			
Spa(s) on Premises	☐ No ☐ Yes: Volume Litres			
Further Details				

PREMISES DETAILS (NON-RESIDENTIAL PREMISES ONLY)			
Please give details of the premises and the nature of use			
Maximum Occupancy Rate (Public Building)			
Number of Persons on Premises			
Other Volumes of Liquid Waste			
Expected Daily Wastewater Volume (Litres/Day)			
Please refer to DOH factsheet: "Si requirements and details on calculations are continued by the second sec	upplement to Regulation 29 – Wastewater system loading rates" for lating daily wastewater volumes.		
Further Details			
TREATMENT SYSTEM DETAI	LS		
☐ Greywater Reuse System – Se			
☐ Alternative Wastewater Treatm	ient dystems – dection d		
	PTIC TANKS TO LEACH DRAINS OR EVAPORATION PONDS		
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SECTION 1 – STANDARD SE	•		
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SECTION 3 – WASTEWATER TREATMENT PLANTS				
Please attach technical details and plant specifications with the application. The following must be covered:				
☐ Capacity	☐ Treatment train details	☐ Alarms		
☐ Volume of treatment tanks	☐ Water quality objectives	☐ Technical drawings of system		
☐ Buffer tank(s) volume(s)	☐ Maintenance			
Disposal Area (m²)				
Disposal Method	☐ Surface Irrigation ☐ Sul	bsurface Irrigation		
Further Details				
Note: Evaporation ponds require an engineer's certification, certifying the evaporation ponds are capable of disposing the total wastewater volumes that is being fed into the ponds. Please attach details and specifications of ponds with application.				
SECTION 4 – GREYWATER REUSE SYSTEM				
Name and Model of Greywater Reuse System				
Disposal Area (m²)				
Disposal Method	☐ Surface Irrigation ☐ Sul	bsurface Irrigation		
Further Details				
Note: If Leach Drains are used for disp	posal, please include the applicable	information in Section 1.		
SECTION 5 – ALTERNATIVE	WASIEWAIER IREAIMEN	ISYSIEMS		
Please attach system's technical s	specifications from the manufactu	urer with application.		
Further Details				
SYSTEM AND SITE LAYOUT	PLANS			
	-	pecified, the application will be returned to		
Unless the following are provided the applicant for resubmission: A copy of plan and specifications.	according to the requirements sp	pecified, the application will be returned to us showing the top and longitudinal section		
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SITE AND SOIL EVALUATION

Where required, site and soil evaluation should be provided in accordance with AS/NZS 1547 *On-site domestic wastewater management*. The requirements of the site and soil evaluation may be varied, based on existing site information or where health or environmental impacts are considered minimal. A SSE is a written report that examines the various aspects of a site in relation to sewage collection, treatment and on-site disposal to ensure adequate management over time. For more details please refer to the <u>Guidance on Site-and-soil evaluation for on-site sewage management</u>.

DECLARATION AND SIGNATURE OF APPLICANT

I hereby apply as the owner, or the person authorised to act on behalf of the owner, for approval to construct or install the apparatus as referred to above. I have completed the appropriate sections of this application form and provided plans that meet the requirements as detailed under 'System and Site Layout Plans'

Applicant's Signature: Date:

PLEASE REFER TO REAR OF FORM FOR PAYMENT OPTIONS

PLEASE SUBMIT THIS FORM TOGETHER WITH THE FOLLOWING PAYMENT 1. Payment in Person 2. Payment by Mail Shire Administration Office Shire of Mundaring 7000 Great Eastern Highway, Mundaring 7000 Great Eastern Highway Cashier Hours 9:00am - 4:15pm Mundaring WA 6073 (Monday-Friday) **PAYMENT OPTIONS** Do not send cash in the mail. Cheques are to be made payable to the Shire of Mundaring. Credit Card payments are to be made by filling out the credit card authorisation below. **APPLICABLE FEES** \$118 Application to Construct or Install an Apparatus for the Treatment of Sewage \$118 Permit to Use Apparatus **CREDIT CARD PAYMENT AUTHORISATION** Credit Card Type: Visa 🔲 MasterCard Fee: \$236 Card Number: **Expiry Date:** Cardholder's Name: _____ Cardholder's Signature: ___ Contact Number: ___ Date: _____ NB: Your signature hereon is authority for us to issue a sales receipt for the amount shown in the space provided above.

Should you have any queries, please email shire@mundaring.wa.gov.au or telephone the Shire's Health Service by calling 9290 6742.