

TRADE WASTE OR SEWER DISCHARGE FACTOR VARIATION

Please complete this form to Infrastructure with Dubbo Regional Council.

APPLICANT DETAILS	
Title	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other - Please specify:
Name/s	
Date of Birth <i>Optional</i>	
Residential Address <i>Include City, State & Postcode</i>	
Postal Address <i>Include City, State & Postcode</i>	
Contact Number	
Email Address	

BUSINESS DETAILS	
Your Name	
Company Name	
ABN	
Company Address <i>Include City, State & Postcode</i>	
Postal Address <i>Include City, State & Postcode</i>	
Contact Number	
Email	

PROPERTY DETAILS					
Lot No		DP/SP No		House Number	
Street/Road					
Town		State		Postcode	

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PROPERTY OWNER INFORMATION	
Are you the property owner?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If no, relationship to owner	<input type="checkbox"/> Tenant/Business Owner <input type="checkbox"/> Other
If other, please specify	
Property Owner/s Name	
Property Owner/s Address	
Property Owner/s Contact Number	
Property Owner/s Email	

OWNER CONSENT	
<p>The owner's authorisation to make this application must be obtained. This is a mandatory requirement of section 78 of the Local Government Act 1993.</p> <p><i>As owner of the above property, I consent to the making of this application and to the entry onto such land by authorised officers of Council for the purpose of determining this application, and any associated inspections</i></p>	
Signature	
Print Name	
Date	

PROPERTY/BUSINESS DETAILS				
Business Type	<input type="checkbox"/> Factory	<input type="checkbox"/> Workshop	<input type="checkbox"/> Restaurant	<input type="checkbox"/> Other
Business Activity <i>Please Specify</i>				
Is this Business Seasonal	<input type="checkbox"/> No <input type="checkbox"/> Yes			
If yes, please specify				
Days of Operation				
Hours of Operation				
Number of Water Meters Servicing the Property		Serial Number/s		
Number of Toilets		Number of Urinals		
Number of Showers				
Evaporative Cooling	<input type="checkbox"/> No <input type="checkbox"/> Yes (please specify type)		<input type="checkbox"/> Domestic <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial	
Swimming Pool Onsite	<input type="checkbox"/> No <input type="checkbox"/> Yes			
Current Trade Waste Discharge Factor		Trade Waste Discharge Factor Sought		
	%		%	
Current Sewer Discharge Factor		Sewer Discharge Factor		
	%		%	

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ADDITIONAL INFORMATION TO SUPPORT YOUR APPLICATION

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APPLICANT SIGNATURE

Signature	
Print Name	
Date	

NOTE TO APPLICANT

Variations cannot be performed for previous watering billing periods. If a variation is approved it will be applied to the next water billing quarter.

PRIVACY NOTE:

Council is bound by the provisions of the Privacy and Personal Information Act 1998, in the collection, storage and utilisation of personal information provided in this form. Accordingly, the personal information will only be utilised for the purposes for which it has been obtained. For further information, please refer to Council's Privacy Management Plan Policy located on Council's website www.dubbo.nsw.gov.au

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WATER USAGE/WASTE WATER GENERATION			
1. Annual (average) water supplied to property (refer to Rates Notice)			kL
2. Garden/Landscape Use	kL	Metered	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Estimated
If estimated, basis for estimation			
3. Used in Product (Allowance)	kL	Metered	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Estimated
If estimated, basis for estimation			
4. Cooling Towers (Allowance)	kL	Metered	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Estimated
If estimated, basis for estimation			
5. Evaporation Loss	kL	Metered	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Estimated
Facility			
If estimated, basis for estimation			
6. Other (Allowance)	kL	Metered	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Estimated
Details			
If estimated, basis for estimation			
Total Allowance:	2 + 3 + 4 + 5 + 6 =		(7)

Your estimation of the discharge factor:			
[1]		-	(7)
Average water supplied to property – Allowance x 100			
Average water supplied to property	=	% [1]	

Please attach any supporting evidence such as meter readings, technical information, production records or areas of gardens/landscape to support this application.