

WATER SUPPLY - CONNECTION REQUEST

Please complete this form for water connection and return to Dubbo Regional Council. Note: A separate application form is required for each property.

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	NSW	Postcode	

PROPERTY INFORMATION/DETAILS			
Activity/s to be carried out on this property	<input type="checkbox"/> Commercial <input type="checkbox"/> Stock and Domestic <input type="checkbox"/> Domestic Only		
If commercial, what is the activity			
Existing water or fire service at the property	<input type="checkbox"/> No <input type="checkbox"/> Yes	If yes, what size (mm)	
Is more than one meter required at this property	<input type="checkbox"/> No <input type="checkbox"/> Yes		
If yes above, how many meters are required		Meter size required (mm)	

PROPERTY OWNER INFORMATION/CONSENT	
Are you the property owner?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If no, relationship to owner	<input type="checkbox"/> Plumber <input type="checkbox"/> Builder <input type="checkbox"/> Developer <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	
<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. Note: This section must be signed by the property owner.</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	

WORKS REQUESTED PLAN
<p>Please provide a plan that indicates:</p> <ul style="list-style-type: none"> • Direction of north. • The property number, location and name of street or road, etc. • Location of work requested. • Approximate location of existing or proposed buildings. <p>In accordance with Council's Water Supply and Sewerage Customer Service Standards, Council will provide a written quote to the applicant within 10 working days of receipt of the quote request. The quote will only be valid for three months after issue.</p> <p>Council will complete the construction work within 40 working days of receiving pre-payment for the work. If you have any enquiries regarding water supply works, contact Council's Capital Program Team on (02) 6801 4000.</p>

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WATER CONNECTION REQUEST DETAILS	
Council will determine if a backflow prevention device is required for the property, in accordance with Council's Water Supply Service Policy and the Plumbing Code of Australia. If required, details will be provided in the written quote.	
Do you want a new water connection , including meter installation? If yes, please indicate the size (mm): <input type="checkbox"/> 20 <input type="checkbox"/> 25 <input type="checkbox"/> 32 <input type="checkbox"/> 40 <input type="checkbox"/> 50 <input type="checkbox"/> 80 <input type="checkbox"/> 100 <input type="checkbox"/> 150 The default domestic size is 20 mm.	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you want to install a water meter only ? (Note: You must already have a service connection) If yes, indicate the size (mm): <input type="checkbox"/> 20 <input type="checkbox"/> 25 <input type="checkbox"/> 32 <input type="checkbox"/> 40 <input type="checkbox"/> 50 <input type="checkbox"/> 80 <input type="checkbox"/> 100 <input type="checkbox"/> 150	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you want to install a fire service ? If yes, please indicate the circle size (mm): <input type="checkbox"/> 20 <input type="checkbox"/> 25 <input type="checkbox"/> 32 <input type="checkbox"/> 40 <input type="checkbox"/> 50 <input type="checkbox"/> 80 <input type="checkbox"/> 100 <input type="checkbox"/> 150	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are you installing any of the following on your fire service? Please indicate as appropriate	<input type="checkbox"/> Hydrant <input type="checkbox"/> Hose Reel <input type="checkbox"/> Sprinkler
Do you want to move or raise a water meter? If yes, please indicate size (mm): <input type="checkbox"/> 20 <input type="checkbox"/> 25 <input type="checkbox"/> 32 <input type="checkbox"/> 40 <input type="checkbox"/> 50 <input type="checkbox"/> 80 <input type="checkbox"/> 100 <input type="checkbox"/> 150	<input type="checkbox"/> Yes <input type="checkbox"/> No
Do you want Council to install a galvanised meter guard? If yes, what size is the meter (mm)? <input type="checkbox"/> 20 <input type="checkbox"/> 25 <input type="checkbox"/> 32 <input type="checkbox"/> 40 <input type="checkbox"/> 50 <input type="checkbox"/> 80 <input type="checkbox"/> 100 <input type="checkbox"/> 150	<input type="checkbox"/> Yes <input type="checkbox"/> No
What type of guard would you like? Please select one option as shown below:	
	Guard on one side (price range \$65 - \$195) Dependant on guard size. Which side?
	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Guard on two sides (price range \$130 - \$390)
	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Enclosed box guard (price range \$180 - \$520) Dependant on guard size
	<input type="checkbox"/> Yes <input type="checkbox"/> No

APPLICANT SIGNATURE	
Signature	
Print Name	
Date	

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

OFFICE USE ONLY			
Receipt Type		Amount	Receipt Number
Cashier			Date