

# KEMPSEY SHIRE COUNCIL

Civic Centre, 22 Tozer Street, Kempsey 2440  
 PO Box 3078, West Kempsey 2440  
 Phone 02 6566 3200 Fax 02 6566 3205  
 Web: www.kempsey.nsw.gov.au Email: ksc@kempsey.nsw.gov.au



## APPROVAL TO INSTALL OR MODIFY A SEWAGE MANAGEMENT SYSTEM

Application is hereby made for an approval under Part C Section 68 of the Local Government Act to operate or install a system of sewage management in respect of the following property.

### PROPERTY DESCRIPTION (where activity to be carried out)

No:	Street:	Location:	Postcode:
Lot No:	DP or Section:	Nearest Cross Street:	

### APPLICANT

Name:	Phone:
Address:	Email:

### OWNER

Name:	Phone:
Address:	Email:

### SEWAGE MANAGEMENT DETAILS

- Approval to install new onsite sewage management system (CE)
- Approval to operate an existing onsite sewage management system (FL)
- Approval to alter/modify existing onsite sewage management system (Does not include complete system replacement)

### BRIEF DESCRIPTION OF PROPOSAL AND LOCATION PLAN

---



---



---



---

### APPLICANTS AUTHORITY

I/We hereby:-  
 Consent to Kempsey Shire Council displaying and copying this application and supporting documentation, including designed, for the purposes of obtaining, when necessary, public comment.

Applicants Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### OWNER'S CONSENT

I/We, \_\_\_\_\_ of \_\_\_\_\_  
 being the Owner/s of the land to which this application relates, hereby consent to the making of this application and hereby grants Council the power of entry to carry out inspection in relation to any land or building to which this application relates.

Owner's Signature(s) \_\_\_\_\_ Date: \_\_\_\_\_

### Note: All owners must sign. If owners by a company the consent must be under company seal

Privacy Statement: Council collects and holds personal information for a number of reasons related to Council business eg to process applications, to issue rate notices, to process correspondence. When you provide personal information to Council it is used in accordance with privacy laws applicable to Council. Your personal information will only be used for purposes related to the business of Council.

# KEMPSEY SHIRE COUNCIL

Civic Centre, 22 Tozer Street, Kempsey 2440  
PO Box 3078, West Kempsey 2440  
Phone 02 6566 3200 Fax 02 6566 3205  
Web: www.kempsey.nsw.gov.au Email: ksc@kempsey.nsw.gov.au



SECTION  
68

## ADDITIONAL INFORMATION

The term Sewage Management System relates to units such as Septic Tanks, Aerated Wastewater Treatment Systems (AWTS), Cesspit Composting toilets and Septic Closets, pan system.

## OPERATE AN ONSITE SEWAGE MANAGEMENT SYSTEM (FL)

When Installed (approximate date): \_\_\_\_\_

Type:

- Septic Tank
- Aerated Waste System
- Composting Toilet
- Cesspit
- Other (Please write type of Unit)  
\_\_\_\_\_

No of Persons in Dwelling: \_\_\_\_\_

No of Bedrooms: \_\_\_\_\_

Method of Final Disposal of Waste Water:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Size of Unit: \_\_\_\_\_

No of Dwellings on Land \_\_\_\_\_

Year Dwelling Built (if known) \_\_\_\_\_

If all wastes are not treated in the system please indicate method of disposal of remaining wastes, eg kitchen, bathroom and laundry water. \_\_\_\_\_  
\_\_\_\_\_

Please provide an A4 plan indicating locations of buildings, sewage management system, roads, watercourses and dams.

One application form is required for each onsite sewage facility.

## INSTALL/MODIFY AN ONSITE SEWAGE MANAGEMENT SYSTEM (CE)

Waste treatment devices include Septic Systems and Aerated Wastewater treatment systems.

Type of Premises: \_\_\_\_\_ Number of persons to use unit: \_\_\_\_\_

Make and type of unit: \_\_\_\_\_ Number of bedrooms in building: \_\_\_\_\_

Capacity of unit: \_\_\_\_\_ Capacity of flushing units: \_\_\_\_\_

Wastes discharging to the unit: \_\_\_\_\_ WC plus: \_\_\_\_\_

Plumbers name: \_\_\_\_\_ License No: \_\_\_\_\_

Address: \_\_\_\_\_

Attach three copies of the site plan with proposed drainage layout shown, including location of unit, buildings, trenches, run-off diversion and environmental sensitive areas, and three copies of the Septic Tank or other waste management system plan and specification. Other details to be included are:-

Topography, soil type and operation, maintenance and servicing.

**(Note: Council may require additional information to assess the application)**

## OFFICE USE ONLY

CE:

FL:

Modification or Alteration to Existing Septic:

Property LA:

Register:

ID:

Receipt Number:

DA Number (if applicable):