

Application for Connection/Disconnection of Water and/or Sewerage

Applicant's Details:

W& S Gang

Applicant's first and last name:		
Applicant's address details:		
Phone Number: Email Address:		
AGREEMENT BY APPLICANT		
		e location shown hereunder, at the applicable fee le of Fees and Charge at the time of the work.
work, and should the actual cost exceed t	his estimate, I will pay th	ual cost will be determined on completion of the he full amount within thirty (30) days of receipt of e, a refund will be made to me by Coonamble
Work Required:		
Connection of Sewerage		□ Disconnection of Water
Property Location Details:		
Type of Property:		
House Number: Street Name:		Town/Village:
Legal Description:		
•	posited Plan (DP) Nu	mber:
Portion: Se	ection:	Folio/Volume:
Council Assessment Number:		_
Property Owner's Details (if differe	nt from applicant):	
Owner's name:	Owr	ner's phone:
Owner's address:		
Signature of Owner:		////
	leted accurately, then sign an	dd mmm yy d return to Coonamble Shire Council in person, by post or,
Signature of Applicant:		Date://
Office Use Only		
Date received:	Receipt #:	Asst #:
Dis/Connection Fee:	Cheque No:	
Job No:		
Meter No:	Meter size:	
Current Reading:	Date of Connection:	

Coonamble Shire Council collects, stores, accesses, uses and discloses any personal Information you provide in order to facilitate services, customer requests and Council business, in accordance with obligations under the Privacy and Personal Information Protection Act 1998 and Council's Model Privacy Management Plan. The retention and disposal of your personal information is governed by the Local Government Record-Keeping Rule GA39. Council takes all reasonable and appropriate steps to protect the privacy of individuals as required by law.

Rates Clerk

🗌 File

Computer Operator