

2025/26 Application to Install or Alter an Onsite Wastewater Management System (OWMS) - Incorporating

Report and Consent under Regulation 132, Building Regulations 2018

☐ Minor alteration to OWMS \$627.00 - alteration that

Please tick the type of application you are applying for:

☐ Construct, install or alter OWMS \$822.00

Environment Protection Act 2017- Environment Protection Amendment Act 2018- Environment Protection Regulations 2021

		consists only of the installation, replacement or relocation of the internal plumbing, fixtures or fittings of an OWMS							ion of
☐ Renew a	permit \$140.00			☐ Transfer a permit \$167.00					
□ Amend a	permit \$175.00			Permit /			v/transfe	er/amend:	
Applicant P	roperty Details								
Property Ow	ner								
Property Ow	ner Postal Address								
Property Ow	ner Phone Number			Email					
Applicant Na (if different fro	me om property owner)								
Applicant Ad	dress								
Applicant Ph	one Number			Email					
Building Surv	eyor Name			Email					
Site Addres	s Details								
No	Str	eet							
Town	,	Lot No		LP/F	PS			Crown	
		LOUNG						Allotment	
Plumber det	tails	LOT NO		<u>- </u>				Allotment	
	tails mber/Drainer for Installation	Lot No				License N	lumber	Allotment	
Licensed Plui	mber/Drainer for Installation	Lot No				License N	lumber	Allotment	
Licensed Plui Responsible	mber/Drainer for Installation iner Address	Lot No				License N		Allotment	
Licensed Plui Responsible Plumber/Dra Plumber/Dra	mber/Drainer for Installation iner Address iner Phone			Plum	nber/Dr	ainer Ema		Allotment	
Licensed Plui Responsible Plumber/Dra Plumber/Dra	mber/Drainer for Installation iner Address			Plun	nber/Dr Details	ainer Ema		Allotment	
Licensed Plui Responsible Plumber/Dra Plumber/Dra	mber/Drainer for Installation iner Address iner Phone tewater Managemen		□ <i>i</i> ling Ext	Plum	nber/Dr Details	ainer Ema	il	to Existing Sys	tem
Licensed Plui Responsible of Plumber/Dra Plumber/Dra Onsite Wast	mber/Drainer for Installation iner Address iner Phone tewater Managemen pplication cails (Where will the	t System Ins	ling Ext	Plum Alteration Alterations tensions to	Details	ainer Ema	il		tem
Plumber/Dra Plumber/Dra Onsite Was Reason for A Premises Det system be inst	mber/Drainer for Installation iner Address iner Phone tewater Managemen pplication cails (Where will the	t System Ins	ling Ext	Plum Alteration Alterations tensions to velling	Details	ainer Ema	il		tem

	Sink(s)		Shower(s)			Trough(s)				
Number of Fixtures to be	Toilet(s)		Bath(s)			Sink Garbage Disposal				
Connected to the System	Spa Bath(s)		Dishwasher(s)			Bedrooms				
	Water Supply	☐ Mains	□Tank		□Other					
	□ All Wate System (Primary)		Capacity (Liters)							
Septic System Details	☐ Sand Filter (Se			Widt		Depth				
	□Treatment Plant (Secondary)		Make/Model: please write below (Certificate of Conformity for Treatment System must be attached to this application)							
	-									
Disposal Method	☐ Soil Absorptio			☐ Sub Surface Dripper Lines						
	□ Wick Trench				□ Other .	Other				
Please attach the following information: Scaled site plans showing proposed construction and septic installation site, existing structures and driveways, adjoining roads and properties, any water courses, north point Current Certificate of Conformity House Floor Plans Land Capability Assessment Report (Required for block less than 8,000m²; close proximity to waterways; shallow ground water present; poor soil conditions or restricted area for effluent disposal) Soil Reports (Required for new dwellings that do not have a Land Capability Assessment) By signing this form, you give permission to an Authorised Officer to enter and inspect the site under Section 246 – 248 of the Environment Protection Amendment Act 2018 (the Amendment Act) for the purposes of assessment of an Application to Install or Alter an Onsite Wastewater Management System (OWMS).										
Signature of Owner(s) /Applicant					Da	ıte				
Name										

Privacy Notification (Environment Protection Act 1970):

The personal information requested on this form is being collected by Council for the purpose of enforcement of the Environment Protection Act 1970 and associated regulations. The personal information will be used solely by Council for that primary purpose or directly related purposes. The applicant understands that the personal information provided is for the purpose of enforcement of the Environment Protection Act 1970 and associated regulations and that they may apply to Council for access and/or amendment of the information.

Onsite Wastewater Management System Plan																	
Addre	ss of S	Site															
Does entry to the property require the presence of someone to unlock gates or are there dogs/livestock present?																	
☐ No ☐ Yes – please provide name and contact details																	
Please include details such as the location and dimensions of the proposed OWMS, all proposed and existing buildings, the location of any streams, water courses, gullies, dams, ponds, bores or wells for domestic supply, water tanks, driveways, swimming pools, excavations, water, phone, gas and electrical trenches and any existing septic tank and sullage lines.							tanks,										
Does the Owner have any future developments planned such as but not limed to a deck, pool, shed etc?																	
			the plar f detail if		☐ Yes		□No										
	•																
							Endor	rseme	nt of	Plum	ber/D	raine	r				
							Signa				-			e:	.//2	0	
					Name:												

(Scale 1:300 — Each square 3m x 3m)



Credit Card Authorisation Form

Ph: 1300 366 244

18 Desailly Street, Sale Victoria

156 Grant Street, Yarram Victoria

PO Box 506, Sale Victoria 3850

This form is used to provide a credit card payment to the Wellington Shire Council.

Please ensure that all fields are fully completed with the correct information and that any relevant documentation is attached with this form i.e. planning application, request for a copy of plans form. We will only use personal information provided by you for the purposes for which it was collected and in order for Council to fulfil its business requirements. A new Credit Card Authorisation Form will need to be completed for each transaction.

Completed forms can be submitted to Council via email to <u>enquiries@wellington.vic.gov.au</u> or via mail to PO Box 506 Sale VIC 3850 or via fax to 03 5142 3501.

Should you have any questions please contact Wellington Shire Council's Customer Service Team on 1300 366 244.

244.		
	Part 1: Applicant Details	
Given Name/s		
Family Name		
Address		
Daytime Phone Number		
Email Address		
	Part 2: Payment Details	
Description (application type)		
Amount Authorised	\$	
Address of property relevant to application		
Payment for rates, infringements and o	animal registration renewals will not be a	ccepted
	Part 3: Credit Card Details	
Name on Credit Card (please print)		
Type of Card (Visa, Mastercard only)		
We do not accept American Express of	r Diners Club.	
Bank Name (NAB, ANZ, Westpac etc)		
Credit Card Number		
Card Expiry Date		
Card Holders Signature Authorising payment of above amount		Date

Office Use Only				
Council Officer				
Receipt Number				
Date				