



SHIRE OF DALWALLINU
SEWERAGE CONNECTION APPLICATION

PROPERTY DETAILS

Street No: _____ Lot No: _____ Street: _____ Town: " Dalwallinu
Assess No: _____ Section: _____

PROPOSED WORK: (Initial sewer plan required to be lodged for) Please tick all applicable boxes)

Residential (Single) Residential (multi unit)

Commercial Commercial (multiple occupancy)

Detail Type of Business (i.e. hairdresser, motel, etc.)

Type of Work (Please tick applicable)

New Connection

Alter/Repair

PROPERTY OWNER DETAILS:

Name: _____

Postal Address: _____

Ph: _____ Mob: _____ Fax: _____ Email: _____

I hereby make an application to the Shire of Dalwallinu for consent to connect/alter on site sewerage plumbing at the property described above.

Signature of Owner (or Agent) _____ Date: _____

PLUMBER DETAILS:

Name: _____ License No. _____

Business Name: _____ Ph: _____ Fax: _____

Postal Address: _____ Email: _____

FEES and CHARGES:

Application & Connection Fee

\$ 171.00

To be filed by office personnel.

CONSENT: *Consent is given to the Owner for the undertaking of the work described above.*

Name of Authorised Officer _____

Signature: _____ Date: _____

Completed Forms can be emailed to shire@dalwallinu.wa.gov.au