

Application for a Permit to Install or Alter a Septic Tank System



Please note that commencing Septic Tank System onsite works without a Permit to Install/Alter is prohibited.

SEPTIC TANK SYSTEM FEES & CHARGES – 2021/2022

PERMIT TO INSTALL	Domestic System	\$900.00	COPY OF OLD PERMIT/PLAN.....	\$38.00
	Commercial System	\$1,820.00	if archived	\$62.00
PERMIT TO ALTER	\$560.00		
TRANSFER A PERMIT	\$150.00		
AMEND A PERMIT	\$156.00		
RENEW A PERMIT	\$125.00		

APPLICATION TYPE

INSTALL A NEW SEPTIC TANK SYSTEM

ALTER AN EXISTING SEPTIC TANK SYSTEM

PROPERTY DETAILS

NUMBER _____ ROAD OR STREET _____

LOCALITY _____

LOT _____ PLAN/SUBDIVISION NO. _____ or TITLE PLAN NO. _____

CROWN ALLOTMENT _____ SECTION _____ PARISH/TOWNSHIP _____

PROPERTY ASSESSMENT NO. (refer to the rates notice) **A** _____

SUPPORTING DOCUMENTATION *(please submit with the completed application)*

- Council may request a Land Capability Assessment or require amended plans after conducting an initial site inspection. A site inspection for your property will be carried out without prior notice.
- One current copy of land title (current to within two months).
- One copy of property plan (for rural properties greater than one hectare).
- One copy of floor plan to scale and clearly showing dimensions.
- One copy of a clear accurate septic site plan to scale indicating the following features:
 - position of all streets and laneways adjacent to the property
 - position of all existing or proposed vegetation (bushes and trees) on the site
 - locations and dimensions of all existing or proposed buildings, garages, sheds, tennis courts, streams, dams, bores, wells, water tanks, fences, swimming pools, excavations, driveways, storm water drains, water pipes, power/phone lines, existing septic systems, tree canopies, garden beds, landscape features and easements that are located on the property or up to 60 metres downhill from the lowest trench
 - location of the proposed septic tank system including all waste water pipe work from the house and all plumbing fixtures, and the liquid capacity of septic tanks
 - label the position of North.

Information Privacy

The personal information requested on this form is being collected by Council for the purpose of issuing a permit in relation to the above service. The personal information will be used by Council for that primary purpose or directly related purposes. The information may also be used to update Council's customer databases to assist Council in discharging its functions or providing services. The personal information collected will not otherwise be disclosed unless permitted or required by law. If the information is not collected we are unable to process your application and provide the service sought by you. Requests for access to and/or amendment of personal information should be made to Council's Privacy Officer.

APPLICANT DETAILS

COMPANY NAME _____

APPLICANT NAME _____

POSTAL ADDRESS _____

PHONE (BH) _____ EMAIL _____

PROPERTY OWNER DETAILS

OWNER NAME _____

POSTAL ADDRESS _____

PHONE (BH) _____ EMAIL _____

PLUMBER

COMPANY NAME _____

PLUMBER NAME _____

POSTAL ADDRESS _____

PHONE (BH) _____ EMAIL _____

LICENCE NUMBER _____

PROPERTY AND SYSTEM SPECIFICATION *(please complete all relevant details)*

TYPE OF PREMISES House Factory Office Shop Other *(specify)* _____

Number of rooms that could be used as bedrooms (including study)? _____

Average number of persons expected to use the system daily? _____

Number of toilets (water closets) and other fixtures that will be connected to the system:

Toilets _____ Sinks _____ Baths _____ Showers _____ Troughs _____

HIGH RISK FIXTURES

Spa >200L Garbage Disposal Units Other *(specify)* _____

PRIMARY TREATMENT

Septic tank | Volume 1,800 L 3,200 L | Material Plastic Concrete

Worm farm *(specify type)* _____

Composting toilet *(specify type)* _____

EPA CA number CA _____

SECONDARY TREATMENT

- Sand filter | Length _____ m Width _____ m Depth _____ m
- Treatment plant | Tank volume _____ L Type _____
- Amended soil mount _____
- Triple worm farm _____

EPA CA number: CA _____

DISTRIBUTION METHOD

- Gravity Pump Rotor Computerised

METHOD OF EFFLUENT DISPOSAL

- Plastic arching Trench Slotted PVC trench
- Length _____ m Width _____ m Depth _____ m
- Sub surface dripper irrigation | Total sub surface irrigation area _____ m²

OFFSITE DISCHARGE

Proposed discharge location _____

Proposed discharge sample point _____

DECLARATION

I understand and acknowledge that:

- the information provided in this application is true and complete to the best of my knowledge
- this application forms a legal document and penalties exist for providing false or misleading information
- Benalla Rural City Council may refuse this application if it becomes evident that any information or supporting documents provided are incomplete or false.

By marking this checkbox I confirm that I have read and understood the all the above statements.

SIGNATURE _____

NAME _____ DATE _____

PAYMENT OPTIONS

CONTACT US

Phone 03 5760 2600 to make a credit payment over the phone.

Fax 03 5762 5537

Email council@benalla.vic.gov.au

IN PERSON

Visit the Council's Customer Service Centre at 1 Bridge Street East, Benalla

MAIL

Send this application back to us with a cheque for the full amount made payable to Benalla Rural City Council, PO BOX 227, BENALLA VIC 3671

OFFICE USE

Date received

Receipt number