

Copy

Return Completed form to:

Waitaki District Council

20 Thames St

Private Bag 50058

Oamaru

Phone (03) 434 8060

Application for Urban Reticulation Services

This form will NOT be accepted unless all details are fully completed

Full Name PETER RAYMOND BISHOP Town OMARU
Postal Address 48, FERNBROOK RD
Contact Phone/Cell 4372527 or CEL 0272204415
Email Address _____

Property Valuation No. 26250102700 Rid Id

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Legal Description. LOT 4 DP 12106

Complete only the options that apply

W01 - Water

- ☒ Connect - Disconnect (circle the appropriate item) Network Fee for Town \$ _____
☐ Size: 20mm - Larger (circle the appropriate item) \$ _____
☐ Increase/Decrease (circle the appropriate item)
▪ I hereby apply to Increase / Decrease from _____ units, to _____ of water. \$ _____

NOTE: Non commercial/Industrial properties LARGER than 1 Hectare, will have restricted supply. (One unit = 1800 litres per day!)
Metered supplies may be required for Commercial/Industrial Activities

S01 - Sewer

- ☒ Connect - Disconnect (circle the appropriate item) Network Fee for Town \$ _____
☐ Size: 110mm 150mm - Larger (circle the appropriate item) \$ _____

NOTE: The property owner is responsible for the Pipe work between the Property boundary and the Council owned sewer main.

S20 - Storm Water to Channel

- ☒ To the Kerb (Use a Building Consent form. A Producer Statement will also be required.)
☐ Connection to the Storm Water Main \$ _____

NOTE: All Storm water Laterals are the responsibility of the property owner.

Other Information:

letter of approval dated 14/08/07 sent to Peter Bishop with fees shown that require to be paid to WDC before carrying out water & sewer connections.

04/09. MNG.

TOTAL \$ _____

Signed

P. R. Bishop

RECEIPT No. _____

Dated

10 / 8 / 07