

**Contact Details:**

Postal Address: PO Box 177, Macksville NSW 2447
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Updated: 1 July 2022 Our Ref: 23075/2010

REQUEST FOR A PRE-PURCHASE OSSMS INSPECTION

Section 68, Part C of the Local Government Act Approvals

| | | | |
|---------------------|--|--------|--|
| Applicant's Name | | | |
| Applicant's Address | | | |
| | | | |
| Email Address | | Phone: | |

PROPERTY DETAILS:

Licence No: _____ Lot No: _____ DP: _____

Street Address: _____ Locality: _____

| | |
|---|--|
| Owner: _____ Address: _____ _____ _____ Phone: _____ Occupier/Agent: _____ | SEWAGE SYSTEM: Installed: <input type="checkbox"/> Within 10 yrs <input type="checkbox"/> Within 15 yrs <input type="checkbox"/> Excess 15 yrs Type: <input type="checkbox"/> Septic Tank <input type="checkbox"/> Composting <input type="checkbox"/> Aerated System <input type="checkbox"/> Cess Pit <input type="checkbox"/> Others _____ Number of persons in dwelling: _____ |
|---|--|

Can you please indicate any difficulties with access to the property for the inspection of the onsite sewage management.

☐ Locked gates ☐ Dangerous Animals ☐ Others _____

| | |
|-------------------------------|--|
| Signature of Applicant | Signature of Owner/s <i>If the applicant is not the owner, owner's consent is required</i> |
|-------------------------------|--|

Date: _____ Date: _____

OFFICE USE ONLY

| | | |
|-----------------|-------------------------------|------------|
| | License No: 20-_____._____.01 | |
| Receipt Number: | Amount Paid: \$233.00 | Date Paid: |