APPLICATION FOR UNDETECTED WATER LEAK

PO Box 177 Macksville NSW 2447

Administration Centre: 44 Princess Street Macksville NSW 2447 Email: council@nambucca.nsw.gov.au Phone: (02) 6568 2555 Website: www.nambucca.nsw.gov.au ABN 71 323 535 981



1.	Applicant Details (being a Property Owner or A	Authorised Representative)
	It is important that Council is able to contact you if more in	nformation is required. Please give as much detail as possible.
	Mr Ms Mrs Dr Other:	
	Given name/s and/or Company/organisation	Surname
	Postal address	
	1 Ostal address	
	Suburb or town	State Postcode
	Contact daytime telephone Email Address	
	Property address for which a Water Account adjustme	ent is requested
	Property address for which a water Account adjustine	eni is requesieu
	Water meter number Date leak noti	ticed/advised Date plumber engaged
	/	/ / /
2.	Terms and Conditions (Important Information)	
	application will only be considered under the following	,, aajasas as
	ns and Conditions: No water account adjustments will be considered for leaking	by 50% e.g calculated rebate is \$3,000, the variation applied to the account will be \$2,000. The first \$1,000 applied at
f	fixtures or water using appliances.	100% with the remaining \$2,000 applied at 50% (\$1,000)
	The Applicant must submit a copy of the Licenced Plumbers' Tax Invoice detailing the leak repair with this application.	granting a total The property owner (or authorised representative) will be
	The concealed leak was repaired by a fully licensed	advised in writing of the outcome of their application. 30 days
ļ	plumber within 14 days of an occupant / property owner or authorised representative becoming aware of the leak	will be granted from the date of this advice to either pay the acocunt in full or enter into a suitable payment arrangement.
i	ncluding, but not limited to, being notified by Council of an	acocunt in full of enter into a suitable payment arrangement.
i	ncrease in water usage.	
• \	This application must be completed and lodged to Council within 21 days of the repair being completed.	
•	f this application is approved the water account credit	
ć	adjustment will be calculated as follows: The lesser of the actual metered amount or twice the	OFFICE USE ONLY
	average water usage for the property as determined	Dronostiv ID
		Property ID
	using three previous equivalent billing periods.	
		Signed by both Owner and Plumber
(using three previous equivalent billing periods. 100% of the total sewer and trade waste usage charges	Meter Reading after Leak Repaired
(using three previous equivalent billing periods. 100% of the total sewer and trade waste usage charges (where applicable) above the average use of these services	Meter Reading after Leak Repaired Copy of Plumbers Tax Invoice Attached
(using three previous equivalent billing periods. 100% of the total sewer and trade waste usage charges (where applicable) above the average use of these services	Meter Reading after Leak Repaired

3. Privacy and Personal Information Protection Notice

- This information is voluntarily required to process your request and will not be used for any other purpose without seeking your consent, or as required by law;
- Your information may comprise part of a public register related to this purpose;
- Your application will be retained in Council's Records Management System and disposed of in accordance with the Local Government Disposal Authority:

Your personal information can be accessed and corrected at any time by contacting this Council. 4. Applicant's Declaration I declare that I have read and accept the Terms and Conditions (see Section 2 on the previous page) of this application and confirm all particulars supplied in this application are correct. I understand that inaccurate or false statements may cause my application to be delayed or rescinded and I give consent for Council to conduct an inspection of the above mentioned property to verify the details of this application should Council request such an inspection. I have attached a copy of the Licenced Plumbers' Tax Invoice detailing the leak repair to this application □Yes Signature/s: Date: / 5. Leak Repair Details This Section to be completed by Licensed Plumber repairing concealed water pipe leak Date Leak Repaired:...../...../..... Service leak from: Pipe Valve Fitting Other (e.g. appliance) Leak location: **Leaking water drained to:** Ground Sewer Stormwater Other: ☐ Yes ☐ No Was the leak readily visible or apparent to the occupant? Cause of leak: Wear Break Tree Root Other (e.g. faulty) Water meter reading immediately after repairs complete (for all properties): (KL) (BLACK NUMBERS ONLY) What repairs did you make?: **Licensed Plumber Declaration** I certify that the information provided in this application is complete, truthful and correct and the repairs made comply with AS/NZS 3500.1 Licensed Plumber Name **Current License Number** Plumbing Business Name ABN

For further information in regards to this application please see Council's 'Undetected Water Leak Policy ' found on Council's website www.nambucca.nsw.gov.au or contact Council on 02 6568 2555 during business hours.

Date:/..../.....