



APPLICATION FOR URBAN SERVICES

Three Waters Manager
Waimate District Council
PO Box 122
WAIMATE 7960

SA _____

Please use this for the following: **Urban Water** **Sewer** **Storm Water**

Please note: This application does not constitute approval to connect to services.

A reply letter will be sent to your mailing address

DETAILS OF APPLICANT

| | |
|------------------|----------------|
| Applicants Name: | _____ |
| Owners Name: | _____ |
| Postal Address: | _____ _____ |
| Email: | _____ |
| Telephone: Home: | _____ |
| Work: | _____ |
| Cell: | _____ |

DETAILS OF PROPERTY REQUIRING SERVICE

| | |
|--------------------|-----------------------------------|
| Property Address: | _____ _____ |
| Legal Description: | Lot / Section _____ |
| | D.P. No _____ |
| | Block _____ Survey District _____ |
| Valuation No: | _____ |

Signature of Applicant: _____

Primary Application Fee for one (1) three water service \$275.00 per Valuation # or Dwelling: _____

For each additional three water service required connected to a primary application \$140.00 each: _____

PAID: _____ DATE: _____

BANK Account No: 010-893-0005000-00 Ref: Water

SKETCH PLAN – Please provide a plan or sketch below, showing the desired location of the services (s) requested. Please include distances to boundaries.

APPLICATION FOR WAIMATE URBAN SERVICES

I hereby make an application for approval to connect the following service(s):

Is this application due to proposed subdivision? **Yes / No**

Resource Consent No. if applicable: _____

Services are required for: **New Build** **Existing Dwelling** **Status Change**

Building Consent No. if applicable: _____

Services are required for: **Residential** **Non-Residential**

If services are required for Non-Residential purposes, please provide details:

URBAN WATER Diameter of connection required _____mm
20mm is normal for a single dwelling

SEWER Number of Water Closets _____

Number of Urinals _____

STORMWATER Number of Connections required _____

Contractors Name: _____

NOTES:

