

Please note:

- Allow up to 20 business days for processing all fields must be completed and information provided to avoid delays; and
- Responses will be emailed unless requested otherwise.

Lo	cation Details										
Cr	own Allotment:		Lot Nu	mber:		Lot Size (m²):					
Sti	reet Number:		Street:								
То	wn:					Postcoo	le:				
Δ	oulisant Dataila										
	oplicant Details ven Name:			Surname:							
Ро	stal Address:										
То	wn:			State:	! 	Postcoo	le:				
Phone (w):		Phone (I	ո)։	Р	hone (m):						
En	nail:										
Pr	operty Owner Detai	ls (if not appli	cant)								
Gi	ven Name:			Surname:							
Ро	stal Address:										
То	wn:			State:	:	Postcoo	le:				
Ph	one (w):		Phone	(h):		Phone (m):					
En	nail:										
Di	ilding and Dronocoe	d Morks Inform	nation								
	ilding and Proposed										
Bu	ilding Type:	□ House □	Factory \square] Shed □ Shop	o 🗆 DP	U □ Other -					
Su	mmary of Proposed	Works:									
			Existing		1	Proposed					
	No. Bedrooms:										
}	No. Studies:										
}	No. Spa Baths:					_					
	Water Saving Fixtu	res:	☐ Yes	☐ No		Yes	Postcode: m): Other -				



Existing Treatment Syste	m Details										
OWMS Permit Number:	S		Date	Installed							
Treatment Type and Siz	e										
Septic Tank		Size Tank (L):									
Septic Tank and Sa	and Filter	Size Tank (L):		Size Sand Filter (m²):							
Aerated Wastewa	ter	Make and Model:									
Treatment System	1	EPA Approval No:									
Other (please spec	cify)										
Existing Land Application	System D	etails									
LAISTING Land Application	System D	Ctalls									
Land Application Syster	n Type and	d Size									
Absorption /	Total L	ength of		Number Trenches:							
•	Trench	es (m):									
Transpiration Trenches	Length			Width Each Trench							
	(m):			(m):							
☐ Sub-surface	Total a	rea Sub-surface irriga	tion (m²):								
Irrigation	Numbe	er Beds:		Area Each Bed (m²):							
Surface Irrigation (h	oso)			1	<u>. </u>						
Surface irrigation (i	lose)										
litional Information											
ease include the followin	g with this	application:									
☐ Existing Permit to	Existing Permit to Install an OWMS (if available)										
☐ Existing Septic Ce	Existing Septic Certificate to Use an OWMS (if available)										
☐ Existing House / E	Building Flo	oor Plan									
This plan must cle	This plan must clearly identify all bedrooms, study's and plumbing fixtures. It must also show all sev storm water drainage										
☐ Proposed House /	' Building I	Floor Plan									
This plan must cle	Proposed House / Building Floor Plan This plan must clearly identify all bedrooms, study's and plumbing fixtures. It must also show all sewer storm water drainage.										



	Site Plan Must include:											
	Lot boundaries;											
		number, street number and names of the surrou	unding streets:									
	 House or building (showing setback distances in metres to property boundaries); 											
	 Sheds, swimmin stormwater drai Layout of existin property bounds Direction of Nor 	g pools, driveways, water pipes, underground pons and dams / water bodies (showing setback distances in metres for itself);	ower or telephone lines, open stances in metres from OWMS);									
	Inspection and Report F	rom Licensed Plumber										
	Report to confirm that t require alteration.	he existing OWMS has been inspected; is function	oning adequately; and does not									
	Maintenance Report (fo	r aerated wastewater treatment systems only)										
	Report to confirm that the	ne system has been serviced within the last three	e months.									
Appli	cant and Property Owner	Declaration										
I decla	are that all information conta	ined in this application is, to the best of my knowled $\mathfrak g$	ge, true and correct.									
Report to confirm that the system has been serviced within the Applicant and Property Owner Declaration I declare that all information contained in this application is, to the best of m Applicant Name: Owner Name: Owner Signature: Owner Signature:		Applicant Signature:	Date:									
0	wner Name: 	Owner Signature:	Date:									
Fee P	ayment, Form Submission	and Privacy Information										
2024 /	2025 Fee Schedule											
□ ow	MS Assessment: \$172.50											
111		ed to Golden Plains Shire Council by email (<u>enquiries</u> person at the Bannockburn (2 Pope Street VIC 3331)										
Plea	se indicate how fee payment	will be made below:										
	Post – cheques are to be ma	de out to Golden Plains Shire Council										
	Phone – Our team will call y	ou for payment										
	In person – visit Council's Ba	nnockburn or Smythesdale Customer Hubs										
governi Privacy	ance, and is strongly committed to p and Data Protection Act 2014. Coun	e Council considers that the responsible handling of personal inforn rotecting an individual's privacy. Council will comply with the Inforn cil has in place a standard operating procedure that sets out the re e any queries regarding this Privacy Statement, please contact the	mation Privacy Principles as set out in the equirements for the management and									

Office Use Only	
Date Payment Processed:	
Receipt Number:	



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requested in checklist below. For an example refer to Council's OWMS Permit Application Guide available at www.goldenplains.vic.gov.au.

* Include setback distance in metres from property boundaries

 \square Street name, lot number, street number and names of surrounding

 \square Sheds, swimming pools, driveways, water pipes, underground power

and telephone lines, open stormwater drains and dams / water bodies#

 $\hbox{\it\# Include setback distance in metres from septic tank system}$

^ Include setback distance in metres from house / buildings

 \square Lot boundaries

☐ House / building*

streets

☐ Layout of proposed (and existing if applicable) septic tank system*^

 $\hfill\square$ For subdivisions – proposed property boundaries and proposed open

 $\hfill\Box$ Fall of the land in the vicinity of the land application system

stormwater drains#

☐ Direction of North