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Clutha District Council

E: help.desk@cluthadc.govt.nz www.cluthadc.govt.nz

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Sewer Connection Application form

Applicant's nam	ie:										
Property owner:	:										
Contact name for enquiries:											
Contact number	r:										
Postal address:											
Email address:											
Valuation numb	er:									Area (Ha):	
Farm/Company name:											
Property addres	ss:										
Legal description	n:										
Name of sewer scheme:											
Application details:		New Replacement									
Has a building consent been		Yes		No	ВС	C No.					
applied for?											
Work required:											
Drainlayer's nan	ne:										
Drainlayer's address:											
Please note this application is only complete on payment of the required fee											
Signature:			,,		,	•	. ,	Date:		•	
Office use only											
Application number:				Rece	ived by:				Date rece	eived:	
Payment received:	Applic Fees S	ation sewer			Financi Contrib Fees Se	utions			Installa costs	ition	
Receipt number:			Received by:					Amount receipted:			

Privacy Statement: The information you provide in this application and any supporting documents will be used by the Clutha District Council to process your application under the Building Act of 2004 and may be shared with relevant government agencies. Any member of the public may, under the Local Government Official Information and Meetings Act 1987, request access to information held by the council. Under the Privacy Act 2020, you have the right to see and correct personal information that the council holds about you. If you would like a copy of the personal information we hold about you, or to have the information corrected, please contact us at help.desk@cluthadc.govt.nz or 0800 801 350