

Application for Consent

Central Highlands Region Water Corporation
ABN/GST 75 224 340 348

OFFICE USE ONLY
 Account No: _____
 File No: _____
 Route: _____
 Sequence: _____
 Declared Owned Rated



7 Learmonth Road
 Wendouree Victoria 3355
 PO Box 152 Ballarat Victoria
 3353 Australia
 Telephone: 1800 061 514
 Facsimile: 03 5320 3299
 Email: technical.enquiries@chw.net.au

Water – New Connection _____ Alteration _____ Disconnection _____
Sewer – New Connection _____ Alteration _____ Disconnection _____
Type of Dwelling / Comments: _____

Property Address: _____
Suburb / Town: _____

Applicant: Owner
 Applicant **With written & signed authorisation from owner**
Name: _____
Address: _____
Telephone No's: _____
NEW CONNECTIONS ONLY
 Contracted date for completion of dwelling / building: _____
Note: C.H.W. commence charging a sewerage tariff (connected rate if applicable) from the above contracted date of completion. Failure to advise of completion date will result in property being rated 4 months after consent Issued.
 I declare all information that I have given is accurate and true.
 Owner / Applicant Signature: _____ Date: _____

Plumbers Name: _____ **License #:** _____
Mobile / Telephone No: _____

OFFICE USE ONLY - FEES

Consent	_____	Sewer Cut in	_____
Meter	_____	Water Service Discon.	_____
Tapping	_____	New Cust Cont.	_____
		Total (GST Exempt) \$	_____

Collection Statement: The personal information on this form will be stored and used to issue and bill you for a consent for the property listed. This information may be disclosed to third party contractors as required for the billing and recovery functions in relation to the consent provided, as authorised by you or as required by law. Without this information Central Highlands Water would be unable to provide a consent as requested, this is in accordance with the Water Act 1989. If you wish to access or correct information about you held by Central Highlands Water please contact us at the address listed on this form.