

**APPLICATION TO CONSTRUCT OR INSTALL AN APPARATUS
FOR THE TREATMENT OF SEWAGE**



1. Application Details

Read the application instructions in Appendix 1 before filling in this form.

Referring to Figure 1 in the Appendix 1, this is an application to the:

Local Government approval only - for a single residential dwelling or any other building that produces 540 litres or less sewage per day.

Local Government and Chief Health Officer/Department of Health approval required - Not a single dwelling (e.g. commercial/multi-dwelling site) and produces more than 540 litres of sewage per day

2. Location of System

Lot Number		House Number	
Street Name			
Town or Suburb			
Nearest crossroad			
Local Government (City/Town/Shire)			
Minesite (Include Minesite name, GPS coordinates and sub-locations)	(If applicable)		

3. Owner / Applicant Details

Owner's Name			
Applicant's Name			
Applicant's Postal Address			
Suburb		Postcode	
Applicant's Phone Number			
Applicant's Email Address			

4. Premises Details

☐ Residential Premises → [Go to Section 4.1](#)

☐ Non-Residential Premises → [Go to Section 4.2](#)

4.1 Residential Premises

- Number of bedrooms
- Number of persons on premises
- Number of other dwellings on the lot
- Is this an ancillary accommodation? ☐ No ☐ Yes → LG Planning approval required
- Spa(s) on premises? ☐ No ☐ Yes: Volume Litres
- Note:

[Go to Section 5](#)

4.2 Non-Residential Premises

- Please give details of the premises and the nature of use.
- Public buildings - please detail the licensed maximum occupancy rate: persons
- Number of persons on premises and **AND** any other volumes of liquid waste generated onsite:

Please refer to DOH factsheet: "[Supplement to Regulation 29 – Wastewater system loading rates](#)" for requirements and details on calculating daily wastewater volumes.

- Expected Daily Wastewater Volume: Litres / Day
- Note:

[Go to Section 5](#)

5. Treatment System Details

- ☐ Standard Septic Tank to Leach Drains or Evaporation Ponds → [Go to Section 5.1](#)
- ☐ Secondary Treatment System (STs) -Listed on DOH website's approved list → [Go to Section 5.2](#)
- ☐ Wastewater Treatment Plants (includes Commercial STs) → [Go to Section 5.3](#)
- ☐ Greywater Reuse System → [Go to Section 5.4](#)
- ☐ Alternative Wastewater Treatment Systems → [Go to Section 5.5](#)

5.1 Standard Septic Tanks to Leach Drains or Evaporation Ponds

- Septic Tank Sizes
- Septic Tank Manufacturer
- Leach Drain Lengths
- Leach Drain Manufacturer
- Is it an alternating system? ☐ Yes ☐ No
- Evaporation ponds require an engineer's certification, certifying the evaporation ponds are capable of disposing the total wastewater volumes that is being fed into the ponds. Please provide details and specifications of ponds with application.

[Go to Section 6](#)

5.2 Secondary Treatment System

- Name and Model of Secondary Treatment System
- Disposal Area m²
- Disposal Method:
☐ Surface Irrigation ☐ Subsurface Irrigation ☐ Substrata Irrigation
- Copy of maintenance agreement attached? ☐ Required
- If leach drains are used for disposal, please complete dot point 3-5 in Section 5.1.

[Go to Section 6](#)

5.3 Wastewater Treatment Plants

- Please attach technical details and plant specifications with application. The following must be covered:

- Capacity
- Volume of treatment tanks
- Buffer tank(s) volume(s)
- Treatment train details
- Water quality objectives
- Maintenance
- Alarms
- Technical drawings of system

- Disposal Method:

☐ Surface Irrigation ☐ Subsurface Irrigation ☐ Substrata Irrigation

Disposal Area Size: m²

- ☐ Evaporation ponds: require an engineer's certification, certifying the evaporation ponds are capable of disposing the total wastewater volumes that is being fed into the ponds. Please provide details and specifications of ponds with application.

- Note:

[Go to Section 6](#)

5.4 Greywater Reuse System

- Name and Model of Greywater Reuse System

- Disposal Method:

☐ Surface Irrigation ☐ Subsurface Irrigation ☐ Substrata Irrigation

Disposal Area Size: m²

- If leach drains are used for disposal, please complete dot point 3-5 in Section 5.1.

- Note:

[Go to Section 6](#)

5.5 Alternative Wastewater Treatment Systems

Attach system's technical specifications from the manufacturer with application.

[Go to Section 6](#)

6. Information for Compliance Assessment

- Lot Size m2
- Are there any existing on-site effluent disposal systems on the lot:
 - ☐ No
 - ☐ Yes → Please provide the following information:
 - Local Government or Department of Health approval number(s) for all existing system(s).
 - Please provide current details on the following:
 - The use(s) of all other premise(s); and
 - Total number of persons that will occupy all other premises on the lot;
 - Estimate total wastewater volumes that is being disposed on-site.

7. System and Site Layout Plans

Unless the following are provided according to the requirements specified, the application will be returned to applicant for resubmission:

- A copy of plan and specifications of the proposed apparatus showing the top and longitudinal section to a scale of not less than 1:50.
- A site plan of the premises to a scale not less than 1:100, showing:
 - the position of all buildings erected or proposed and the position of the proposed and any existing apparatus including setback distances.
 - the position, type and proposed use of all fixtures intended to discharge into the apparatus;
 - the position and setback distances of all drains, pipes, inspection openings, vents, traps and junctions in relation to buildings and boundaries;
 - the size of pipes and fittings and the fall of the drains;
 - details of the proposed and any existing effluent disposal system and its setback distances to buildings, boundaries and trafficable areas; and
 - the source of water supply to be used in connection with the apparatus if premises is not supplied by a non-reticulated mains supply.

8. Site and soil evaluations

Where required, site and soil evaluations should be provided in accordance with AS/NZS 1547 *On-site domestic wastewater management*. The requirements of the site and soil evaluation may be varied, based on existing site information or where health or environmental impacts are considered minimal. A SSE is a written report that examines the various aspects of a site in relation to sewage collection, treatment and on-site disposal to ensure adequate management over time. For more details please refer to the [Guidance on Site-and-soil evaluation for on-site sewage management](#).

9. Declaration and Signature of Applicant

I hereby apply as the owner, or the person authorised to act on behalf of the owner, for approval to construct or install the apparatus as referred to above. I have completed Section 1-6 of this application form and provided plans that meet the requirements detailed in Section 7.

Also attached (if required) is a local government report for an application to the Chief Health Officer.

Applicants Signature:

Date:

Please print name:

LOCAL GOVERNMENT REPORT

(TO BE PROVIDED WHERE AN APPLICATION TO CONSTRUCT OR INSTALL AN APPARATUS IS MADE TO THE CHIEF HEALTH OFFICER, PUBLIC HEALTH)
(Local Government Use Only)

1. APPLICANT / LOCATION DETAILS

Owner's Name

Applicant's Name

Street

Town or Suburb

Lot or Pt. Lot No.

House No.

Local Government.

2. SITE CONDITIONS

Nature of Soil:

☐ Sand

☐ Gravel

☐ Loam

☐ Clay

☐ Other, specify:

Depth from natural ground level to highest known permanent/seasonal or tidal watertable (mm)

Distance from natural water bodies _ metres

Will the apparatus be installed in any of the following locations:

- | | | |
|--|------------------------------|-----------------------------|
| ☐ Within 30 m of a well, bore, watercourse, dam intended to be used for human consumption | ☐ Yes | ☐ No |
| ☐ In an area likely to be subject to flooding or inundation in a 1:10 year return event. | ☐ Yes | ☐ No |
| ☐ In Sewage sensitive areas? | ☐ Yes | ☐ No |
| ☐ In Public drinking water source areas? | ☐ Yes | ☐ No |

If yes to any of the above, describe course of action taken:

- | | | |
|---|------------------------------|-----------------------------|
| ☐ Is the information on Section 6 of the application form correct? | ☐ Yes | ☐ No |
| ☐ Has a DA been issued for this development? | ☐ Yes | ☐ No |
| ☐ Are there any conditions imposed on the planning approval regarding an onsite wastewater system? | ☐ Yes | ☐ No |

List the conditions:

3. RECOMMENDATIONS OF LOCAL GOVERNMENT

- ☐ Approval recommended (subject to the conditions listed below)
☐ Approval not recommended (reasons for refusal attached)

4. CONDITIONS OF APPROVAL

Type of Disposal System and Dimensions (if different from application form):

Other Conditions:

(Any further conditions should be attached)

Delegate of Local Government:

Local Government Approval No.:

Date:

Appendix 1

Instructions for completing application form:

- Complete Sections 1-8 in full.
- Ensure plans and drawings are according to the specifications detailed in Section 7 of the application form.
- Ensure relevant application fees detailed in Appendix 2 are paid.
Should you need assistance, contact your local government's Environmental Health Officer.

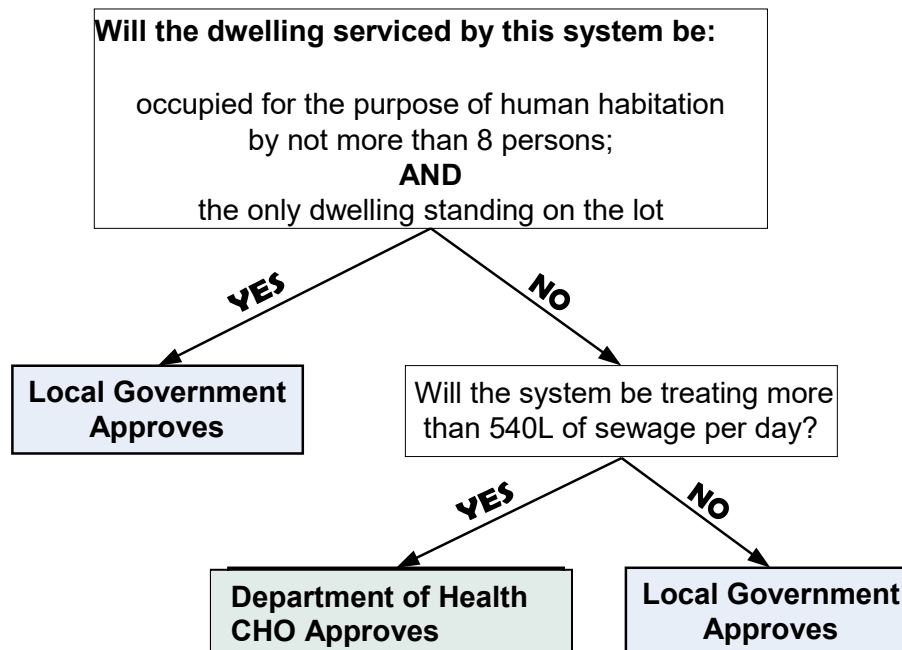
For applications to the Chief Health Officer (CHO)/Department of Health ONLY:

- Submit your application via email to WWApps@health.wa.gov.au, with the local government report.
- You may only apply to the CHO without a local government report if your local government has not assessed your application within 28 days.

Compliance with regulations:

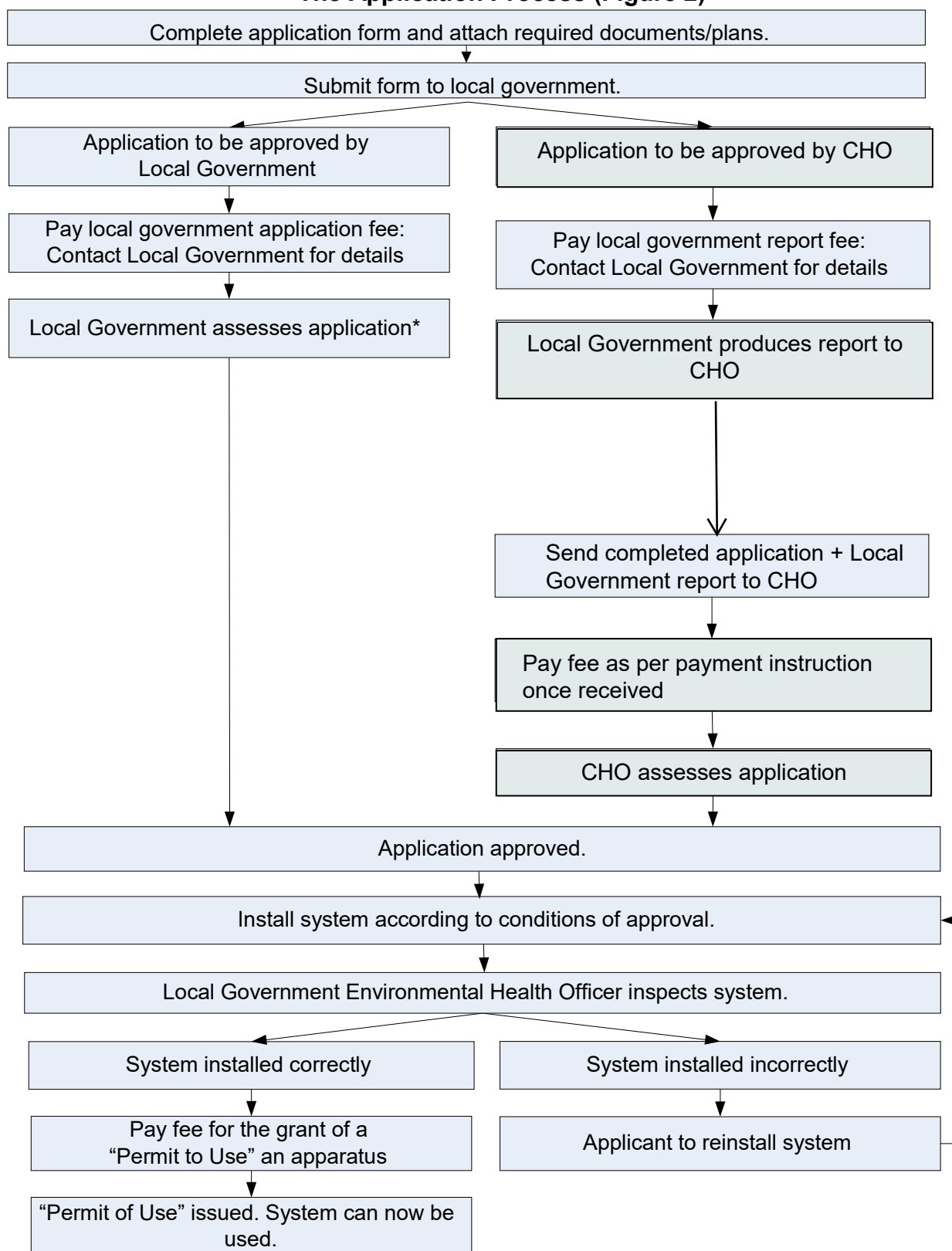
- Construction of the apparatus shall be in accordance with the requirements of the Health (Treatment of Sewage and Disposal of Effluent and Liquid Waste) Regulations 1974.
- Approval will not be given for the installation of an apparatus where sewer connection is available as provided for by either section 72 or section 81 of the Health Act 1911.

Who approves your application? (Figure 1)



CHO: Chief Health Officer

The Application Process (Figure 2)



*Unapproved applications will be returned to applicant with reasons for refusal included.

Appendix 2

The following fees will apply:

Local government application fee (paid to local government) **\$ 118.00**

AND

(when CHO approval is required)

Department of Health (WA) application fee:

(a) with a local government report **\$ 120.00**

(b) without a local government report* **\$ 110.00**

Local government report fee ***recommended fee* \$ 118.00**

(This fee is set by the local government and paid to the local government)

When the application is approved:

Fee for the grant of a permit to use an apparatus **\$ 118.00**

(including all inspections)

*only permitted when local government fails to provide a local government report within 28 days of request.

For applications to the Chief Health Officer, a \$120.00 application fee must be paid.

Once the Chief Health Officer receives your completed application and all required information, an officer from the Department of Health will make contact with the applicant and provide instructions on how to pay by email.

Applications must be fully **completed** and **signed** before they can be processed.