

Premises Details (please	e tick √)					
☐ Single Dwelling	Existing Developmen		t	☐ Indus	strial	
Residential		☐ Commercial			Ancil	lary Accommodation
☐ New Development	☐ Multiple Dwellings		ings			
Other (please specify	Other (please specify):					
Application type (please tick ✓)						
Single effluent disposal system on single lot for single residence						
Additional (second) system						
☐ Non-residential development, producing less than 540L per day						
☐ Non-residential development, producing more than 540L per day  Note: if selecting this category, the Environmental Health Officer will need to provide you with a Department of Health form to complete. Additional fees will apply.						ou with a Department of
Plans required for the ab	bove to scale of: 1:100, 1:200 or 1:500					
Location of Installation						
Lot No.:				House No:		
Street:						
Suburb:				Postcode:		
Cabarb.						
Owner Details						
Owner's Name:						
Postal Address:						
Email:				Phone No.:		
Applicant Details	Note: Approv	al will be sent to ap	plican	t only		
Applicant's Name:						
Postal Address:				T		
Email:				Phone No.:		
System Details (please t	tick √)					
Septic tank (s)	. ,		☐ G	Grey water System		
Aerobic Treatment Unit			Pump tank			
Other (please specify				•		

Form: B&H00221 v1

30.03.2022



Details of Apparatus ticked above				
Manufacturer and Model:				
Size:				
Number of Bedrooms:				
(Residential dwelling only, includes enclose	d studies)			
Floor plans required				
Expected daily wastewater volume: (non-residential only)				Litres/ day
Is there an existing effluent disposal system on site?		☐ Yes	☐ No	
Is there a spa?		☐ Yes	☐ No	
If yes to the above, does it exceed 350L	?	☐ Yes	☐ No	
Other details:				
Type of Disposal system (please tick)				
☐ Concrete leach drains		☐ Pla	stic leach drains	
Other leach drain type		☐ Irriç	gation area	
Other (please specify):		1		
Details of Disposal system ticked above	•			
Manufacturer and length:				
Area size:				
Alternating system?	☐ Yes ☐	No		
Disposal Technique (please tick):  Surface Sp Subsoil Dri Substrata I		pper		
Other details:				
Site conditions (please tick ✓)				I
☐ Sand ☐ Gravel		☐ Loa	ım	☐ Clay
Other (please specify):				



Site conditions ticke	d above					
Depth from natural ground level to highest known water table:						
Distance from natural water bodies if less 100m:						
Will the system be within 30m of a bore, dam or water course used for drinking (please tick)		☐ Yes	☐ No			
Will the system be in an area subject to flooding or inundation in a 1 in 10-year event (please tick)			☐ No			
Other details:						
		•				
Declaration						
	as referred to abo	ove. I confirm tl	to act on behalf of the nat, to the best of my be circumstances.			
Full Name		Si	Signature		Date	
Office Use Only					Records	
Office Use Only Date Received:		Receipt	No.:		Records	
-		Receipt Septic I			Records	

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Application Checklist
Submission of an Application
<ul> <li>The Shire of Capel only approves single effluent disposal system on a single lot for a residence or other development producing no more than 540L per day.</li> </ul>
<ul> <li>For systems above this limit, please complete this application and an Environmental Health Officer will provide an additional Department of Health form for you to complete. Additional fees will apply.</li> </ul>
<ul> <li>For new dwellings a Septic approval is required before a Building approval will be issued.</li> </ul>
Please visit the Shire website: <u>www.capel.wa.gov.au</u> for more information.
Lodge application by:
o email to info@capel.wa.gov.au
o mail via post to PO BOX 369 Capel, WA 6271
<ul> <li>person at the Shire Office at 31 Forrest Road, Capel WA, 6271</li> </ul>
Receive a confirmation email with a request for payment for the application
Pay the fee of <b>\$236.00</b> over the phone with a credit card or pay in person at the Shire Office on 9727 0222
Make sure you have sent in all the required documents with the application.
(If further information is required a Health Officer will be in contact)
Drawings
Please provide a drawing of your <b>site plan</b> for this application with the following:
Drawing to scale of either 1:100, 1:200 or 1:500
Location of effluent disposal system and all drains and pipework
Distance of the system from all buildings, boundaries, bores, waterway and waterbodies
Distance of system from all trafficable areas
Contour lines indicating the slope of the land
☐ Floor Plan
Aerobic Treatment Unit
If the application is for an Aerobic Treatment Unit, a copy of the <u>maintenance agreement</u> between the owner and the authorised service company must also be included.
When Approval has been granted
Have I received my approval?
☐ Yes

When you have obtained approval, you may proceed with the construction or installation of the apparatus.

However before sealing the septic tank(s) or covering the drains they must be inspected by the Shire of Capel and a **Permit to Use will be issued.** To arrange an inspection please contact an Environmental Health Officer from the Shire of Capel on 9727 0222.

Please note that it is an offence under Section 107(4) of the Health Act 1911 to use an apparatus before it has been inspected and issued with a permit to use has been issued for the apparatus.



□ No
Work must not commence until Approval is granted  Please note that it is an offence under Section 107(2) of the Health Act 1911 to start work on the construction or installation of an onsite effluent disposal system without approval.
Please contact the Shire of Capel on 9727 0222 if you have any further queries