

Application for Water Service Alterations

APPLICANT DETAILS			
Applicant Name			
Postal Address			
Contact Number		Mobile	
Email Address			
SITE DETAILS			
Address			
Assessment No.			
Lot & Plan Details			

SERVICE DETAILS			
New Connection of Service (A)		<input type="checkbox"/>	Removal of Existing Service (B)
		<input type="checkbox"/>	<input type="checkbox"/>
Service Size	<input type="checkbox"/> 20mm	<input type="checkbox"/> 32mm	<input type="checkbox"/> 50mm
	<input type="checkbox"/> 25mm	<input type="checkbox"/> 40mm	<input type="checkbox"/> 80mm
<input type="checkbox"/> 100mm			
<input type="checkbox"/> 150mm			
Alteration of Existing Service Size – Downgrading (C) / Upgrading (D)			
Existing Service Size	mm		Proposed Service Size
		mm	
Property Differential Rating Category			Maximum Peak Flow Demand Required
Hydraulic Review Requirement for Alteration Either (A), (C) or (D)	<input type="checkbox"/> Residential Categories 1 to 3 – N/A		
	<input type="checkbox"/> Residential Categories 4 to 6 – A copy of the Hydraulic Review Form completed by a Licensed Plumber is attached		
	<input type="checkbox"/> Residential Categories 7 to 10 and Commercial Categories 11 to 80 – A copy of the Hydraulic Review Form completed by a hydraulic engineer is attached		
Relocation of Existing Service (E)			
Service Size	mm		
Relocation Details (Relocation requests are subject to Council approval)	<input type="checkbox"/> Convert above ground meter to a below ground meter at existing location		
	<input type="checkbox"/> Relocation of service (left/right, inside/outside boundary)		
	<input type="checkbox"/> Relocation of service AND convert to below ground in meter box		
Reason for Connection / Removal / Alteration / Relocation			

☐ For New Service or Relocation, a sketch showing the position of the proposed location is attached

Applicant's Signature		Date	
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SITE SKETCH – For New Service or Relocation (Note: Council has mandatory meter locations that may dictate final position.)

Where no standard fee applies, Council will provide a fixed fee quotation upon receipt and processing of this application. The full cost of the works must be paid in full prior to Council undertaking the work.

To be completed, signed and returned to: Mount Isa City Council
PO Box 815
Mount Isa QLD 4825
city@mountisa.qld.gov.au

OFFICE USE ONLY

RECEIVING OFFICER TO COMPLETE

Date Received		Document ID	
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WATER & SEWER TO COMPLETE

Within Council's declared water service area? (New Connections)	<input type="checkbox"/> Yes <input type="checkbox"/> No If No, Resolution No. if applicable:
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Site Visit Required	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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Applicable Fees	<input type="checkbox"/> Standard Fee Advice Provided to Applicant	<input type="checkbox"/> Fixed Price Quotation Provided to Applicant	\$ Amount
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Approved	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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Approving Officer (Name and Sign)		Date	
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Receipt Number of Payment	
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PRIVACY STATEMENT

Mount Isa City Council is collecting your personal information on this form to order to comply with its responsibilities and obligations as a Local Government. The information will only be accessed by authorised Council employees and contractors, who have a legitimate need for the information to process applications, requests etc. Your personal information will not be given to any other person or agency unless you have given us permission to do so or we are required to do so by law.