

Western Bay of Plenty District Council WATER Connection Application and Acceptance

Site/Location Details: Address:			Town:				
Legal Description:	Lot Size (ha):						
Val Ref:			Parcel No.:				
Details of Owner:		Details o	f Applicant (if different from owner):				
Name:		Name:					
Postal Address:		Postal Addre	ss:				
Email:	Phone:	Email:	Phone:				
New Metered □	Disconnection		Relocation				
Proposed Use:							
Domestic Building: Urban Zones	Horticulture-Agriculture		Commercial/Industrial-New Building				
Domestic Building: Rural, Lifestyle and Rur	al-Residential zones (NOTE	: Restricted s	supply—tank system be in installed)				
Other:							
Conditions:							
Condition 1—Approved Contractor: You must nominate one of the Approved Contractors know the methods and materic work to Council's specified standards. Upon complete As-Built information required overleaf. Paymeters.	ipletion of the work, the nomin	nated contracto	ements for them to carry out the "Installation Requirement". Council and it is a condition of this consent that they do the ir is required to sign the declaration and return this along with to the fees noted below.				
1. Downer	58 Taurikura Drive	e, Tauriko, Ta	uranga, 3110 021 876 971				
2. Chappy Te Moni	218 Manoeka Roa	d, RD3, Te Pւ	uke 3183 027 355 5137				
3. Bay Ground Control Ltd	60A Enterprise Dr	ive, Papamoa	3118 07 572 2242				
4. Loveridge Ltd	PO Box 14433, Ta	uranga 3143	07 577 6348				
Other Conditions:							
Signed by or on behalf of the or	wner:						
I request connection to Council's water I agree to the Terms and Conditions of Signed:	Supply and terms of Westerr	_	e to the above conditions. y District Council's Water Supply System Bylaw 2020				
Name: Note: Please place a tick in both boxes i	n order for your application to	he processed					
Connection details—To be comp	, 11	•	ctor				
New Installation Requirements:	Jieceu Dy Courrent an	u Gomerae					
Connection:	Yes Diamete	er:					
Meter:	Yes ✓ Descript	tion:					
Manifold Backflow:	Yes ✓ Descript	tion:					
Tank System:	Yes	connections i	in Rural, Lifestyle and Rural-Residential zones)				
Other Backflow Device:	Yes No Descript	tion/Class:					
Contractor:		Date connect	ted:				
Receipted by: (WBOPDC office	Use Only)						
Administration Fee \$150 PLUS year	part T UAC	OTAL FEE	Receipt No.				
CSR Name:	Signature:		Date sent to Rates Div.:				
Utilities Operations: (please date as o	completed)						
Approved	Advise Customer	/ /	Send form to nominated /				

As-Built Inf	ormation—	To be compl	eted by Co	ontractor							
Meter:	Meter serial	No.:				Meter siz	e:				
Meter type & ເ	unit: Domestic ((M) Do	mestic (I)	Comr	nercial (M)		Comm	nercial (I)		Other [
Date installed:	/	/		Meter rea	ading:						
Backflow Type	:	Air Gap		RPZ		Doi che	uble eck		Dete	ector :k	
Backflow Seria	al Number:			Watts		RM	1C		Acu	flow	
Location Descr	ription: (i.e.	30m from sout	hern bounda	ary, inside o	orchard sl	helter, 1m	ı LHS (driveway)		<u> </u>	
Sketch of local	tion (show ro	ad and propert	y boundarie:	s and conn	ection loc	ation wit	h dime	ensions)			
	•		-					-			
Installation	(approved	contractor)									
l,				of						(cor	mpany)
Certify that the a information suppl	bove connection lied is complete.	was made to the	standards req	uired by WBC	PDC (Code	of Practice	e for Dev	velopment)	and that tl	ne As-Bı	uilt
Signed: IQP No.				Date:							
Return Forn								anga Mail (Contro To		21.42
Ketuili Foili		Team, Western Inail to: water@w			icii, Private	Bay 1280	o, raur	anga Mali C	Lentre, Ta	uranga	3143
WBOPDC OFFI	CE USE ONLY	':			Date:			Signatu	re:		
1. Finance Depa	artment	Rates, Billing	and Meter Da	nta Recorded							
2. GIS Departn	nent	As-Built Data									
3. Information	Services	Property File									
The persor	nal information_c	on this form will be	used by Coun	ncil specifically	y for the pu	rpose of pr	ocessin	g and identi	ifying the a	application	on.