

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	Details of Applicant (if different from owner):								
Name:		Name:									
Postal Address:		Postal Add	ress:								
Email:	Phone:	Email:	Phone:								
New Metered	Disconnection	on \square		Relocation							
Proposed Use:											
Domestic Building: Urban Zone	es Horticulture-Agric	culture \square	Commercial/Industrial	-New Building							
Domestic Building: Rural, Lifest	tyle and Rural-Residential zone	s (NOTE: Restricted	l supply—tank system b	e in installed)							
Other:											
Conditions:											
Condition 1—Approved Cont You must nominate one of the Appr These contractors know the method work to Council's specified standard the As-Built information required ov	roved Contractors listed below and ds and materials required by Weste ds. Upon completion of the work, ti	rn Bay of Plenty Distr he nominated contrac	ict Council and it is a condi ctor is required to sign the o	out the "Installation Requirement". tion of this consent that they do the declaration and return this along with							
1. Downer	58 Taurikı	ura Drive, Tauriko, ⁻	Tauranga, 3110 021	876 971							
2. Chappy Te Moni	218 Mano	eka Road, RD3, Te	Puke 3183 027	7 355 5137							
3. Bay Ground Conti	rol Ltd 60A Enter	prise Drive, Papamo	oa 3118 07	572 2242							
4. Loveridge Ltd	PO Box 14	1433, Tauranga 314	3 07	577 6348							
Other Conditions:											
Signed by or on behalf	of the owner:										
I request connection to Council's water mains at the above address and agree to the above conditions.											
☐ I agree to the Terms and C	Conditions of Supply and terms of	Western Bay of Pler	nty District Council's Wate	er Supply System Bylaw 2020							
Signed:		Date	e:								
Name:	both boxes in order for your appl		1								
Connection details—To	, 11	*									
New Installation Requireme	•	ich and Contra	actor								
Connection:	<u></u>	Diameter:									
Meter:	— Yes ✓	Description:									
Manifold Backflow:		Description:									
Tank System:	Yes [(Required	for new connection	s in Rural, Lifestyle and R	ural-Residential zones)							
Other Backflow Device:	Yes No No	Description/Class:									
Contractor:		Date conne	ected:								
Receipted by: (WBOPE	OC office Use Only)										
Administration Fee \$165	PLUS part year UAC	TOTAL FEE	Receip	t No.							
CSR Name:	Signature:		Date sent to R	Rates Div.:							
Utilities Operations: (please date as completed)											
Approved Signature:	Advise Customer (if not approved)	//	Send form to Contractor	o nominated ////////////////////////////////////							

As-Built Information—To be completed by Contractor											
Meter:	Meter seria	l No.:				Meter siz	ze:				
Meter type & เ	ınit: Domestic	(M) Doi	mestic (I)	Comr	mercial (M)		Comm	ercial (I)	Oth	ier	
Date installed:	/	/		Meter re	ading:						
Backflow Type	: :	Air Gap		RPZ			uble eck		Detecto check	or	
Backflow Seria	al Number:			Watts		RI	ИС		Acuflo	w	
		30m from sout									
Skelch of local	uon (snow ro	oad and property	y Doundarie	S ANG CONN	ecuon loc	auon Wil	.ii aime	IISIUNS)			
Installation	(approved	l contractor)									
l,				of						(compa	any)
Certify that the al information suppl	bove connection lied is complete	n was made to the	standards req	uired by WBC	OPDC (Code	of Practic	e for Dev	relopment)	and that the \imath	As-Built	
Signed:			IQP No.				Ε	Date:			
Return Forn		s Team, Western E mail to: water@w			ncil, Private	Bag 1280	3, Taura	anga Mail C	Centre, Taura	inga 31	43
WBOPDC OFFI	CE USE ONL	Y:			Date:			Signatu	re:		
1. Finance Depa	artment	Rates, Billing	and Meter Da	ata Recorded							
2. GIS Departm	nent	As-Built Data									
3. Information	Services	Property File									
The person	nal information	on this form will be	used by Cour	ncil specificall	y for the pu	rpose of p	rocessing	g and identi	fying the app	lication.	