

# Proposed Plumbing & Drainage & On-Site

# 2

The completion of questions 1 – 3 on this form is **mandatory** for all applications involving the assessment of plumbing and drainage plans or work against the *Plumbing and Drainage Act 2002*. The use of this form is not mandatory for questions 5 – 6 as approvals to connect to or disconnect from a water service or sewerage service as those approvals are required under the *Water Act 2000*. Service providers can prepare their own forms for those applications.

NOTE	This form is to be used for the purposes of sections 85, 86 and 86A of the <i>Plumbing and Drainage Act 2002</i> .																
<p><b>1. Water supply plumbing</b></p> <p>Completion of this section is mandatory if there is water supply plumbing work</p>	<p>If the application is for water plumbing work, provide details of the following —</p> <p>(a) Nature of the work (<i>Tick applicable box/es</i>)</p> <p><input type="checkbox"/> New      <input type="checkbox"/> Alteration      <input type="checkbox"/> Repair      <input type="checkbox"/> Disconnection</p> <p><input type="checkbox"/> Other (<i>Specify</i>) _____</p> <p>(b) Type &amp; class of pipe to be used on the premises _____</p> <p>(c) Type of backflow prevention device (<i>If applicable</i>) (<i>Attach list if necessary</i>)</p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div>																
<p><b>2. Sanitary plumbing &amp; sanitary drainage</b></p> <p>Completion of this section is mandatory if there is sanitary plumbing or sanitary drainage work</p>	<p>If the application is for sanitary plumbing &amp;/or drainage work, provide details of the following —</p> <p>(a) Nature of the work proposed (<i>Tick applicable box/es</i>)</p> <p><input type="checkbox"/> New      <input type="checkbox"/> Alteration      <input type="checkbox"/> Repair      <input type="checkbox"/> Disconnection      <input type="checkbox"/> New connection</p> <p><input type="checkbox"/> Other (<i>Specify</i>) _____</p>																
<p><b>3. New fixtures to be installed</b></p> <p>Completion of this section is mandatory if there are new fixtures</p>	<p>Indicate the number of new fixtures to be installed —</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">Sinks:</td> <td style="width: 25%;">Basins:</td> <td style="width: 25%;">Urinals:</td> <td style="width: 25%;">Showers:</td> </tr> <tr> <td>Baths:</td> <td>W.C.s:</td> <td colspan="2">Laundry Tubs:</td> </tr> <tr> <td colspan="2">Greywater Use Facility: (in sewered area)</td> <td colspan="2">Other:</td> </tr> <tr> <td colspan="4"><b>Total number of new fixtures:</b></td> </tr> </table>	Sinks:	Basins:	Urinals:	Showers:	Baths:	W.C.s:	Laundry Tubs:		Greywater Use Facility: (in sewered area)		Other:		<b>Total number of new fixtures:</b>			
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<b>Total number of new fixtures:</b>																	
<p><b>4. Disposal of sewage in UNSEWERED area</b></p> <p>Completion of this section is mandatory if there is an on-site sewerage facility</p> <p>Full details of the method of sewage disposal must be provided. If an on-site sewerage facility is proposed (eg. septic tank), the details must be sufficient to show compliance with the <i>QLD Plumbing and Wastewater Code</i>.</p>	<p>If the application is for an on-site sewerage facility, provide details of the following</p> <p><b>Type of facility</b></p> <p><input type="checkbox"/> Aerated or Aerobic sand filter treatment system Brand _____ Capacity _____ Capacity _____ Capacity _____ Model _____ <input type="checkbox"/> Other</p> <p><input type="checkbox"/> Service agent (if known) _____</p> <p><input type="checkbox"/> Composting Toilet Size _____ Details _____ Type _____</p> <p><b>Description of Work</b></p> <p><input type="checkbox"/> New dwelling      <input type="checkbox"/> Connect to existing facility      <input type="checkbox"/> Conversion from Septic to Treatment Plant</p> <p>Number of bedrooms in dwellings to be serviced by the facility _____</p> <p>Maximum number of persons to be serviced by the facility _____</p> <p><small>Note: If the design capacity of the treatment system is greater than 20 equivalent persons, the use is an Environmental Relevant Activity and a separate approval will be required. Note: All applications must be accompanied by an On-site Sewerage Evaluation Report.</small></p>																

**OFFICE USE ONLY**

DATE RECEIVED		REFERENCE NUMBER/S	Approved form 2 Version 3, 10/08
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<p><b>5. Water Service</b> Question 5 is only required to be completed if the application involves the installation of a new water service or disconnection of an existing water service.</p>	<p>If the application is for a new or disconnection of an existing water service, complete the following</p> <p><input type="checkbox"/> New water service</p> <p>a) Purpose of the water service (Tick applicable box/es)</p> <p><input type="checkbox"/> Domestic    <input type="checkbox"/> Industrial    <input type="checkbox"/> Commercial    <input type="checkbox"/> Fire</p> <p><input type="checkbox"/> Other (specify) _____</p> <p>b) Size of the service required? ( mm) _____</p> <p><input type="checkbox"/> Disconnection of an existing water service</p>				
<p><b>6. Sewerage Service</b> Question 6 is only required to be completed if the application involves the installation of a new sewerage service or disconnection of an existing sewerage service.</p>	<p>If the application is for a new or disconnection of an existing sewerage service, complete the following</p> <p><input type="checkbox"/> New sewerage service</p> <p><input type="checkbox"/> Disconnection of an existing sewerage service (provide reason)</p> <table border="1" data-bbox="472 544 1528 696"> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> <tr><td> </td></tr> </table>				