

Disconnect Sewer Connection

10 Graham Place, CASINO 19-25 Woodburn Street, EVANS HEAD Locked Bag 10, CASINO, NSW, 2470
Phone: 02 6660 0300 Fax: 02 6660 1300 council@richmondvalley.nsw.gov.au

| Office Use | | Records Only | |
|---|--------------|--------------|--|
| Date | DA No: | | |
| Amount: | Land ID: | | |
| Receipt No: RAMS - SwrDisInsp | Property ID: | | |
| 3 3 4 | | | |
| Applicant Details | | | |
| Name(s): | | | |
| Address: | | | |
| Suburb: | | Post Code: | |
| Phone: | Mobile: | | |
| Email: | | | |
| I hereby make application for the sewer disconnection at the property described below | | | |
| Applicants Signature: | | Date: | |
| | | | |
| | | | |
| Sewer Connection Details | | | |
| Address of Connection: | | | |
| Lot: | Sec: | DP: | |
| Location of Boundary Shaft: | | | |
| Reason for Disconnection: | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Operational Staff to complete | | | |
| Disconnected by: | | | |
| Date: Inspecting Officer: | | | |

| Draw a sketch of your properties location also indicate the location of the sewer connection to be disconnected. Note the surrounding house numbers and nearby cross streets | | |
|---|--|--|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |