To: Waters and Wastes Manager
Tasman District Council
Private Bag 4
Richmond 7050
engineering.csrs@tasman.govt.nz



Stormwater and Wastewater

This form is to be used for requests to connect to the public stormwater or wastewater drainage network, to alter a connection, or to disconnect.

Details of Property:		
Property address for connection:		
Name and Address of A	pplicant:	
Applicant:		
Address:		
Daytime Phone No:	Email address:	
Connection details:		
☐ Plan of proposed connection a	ttached? Yes / No	
☐ Work to be carried out by the	Council's contractors and billed to applicant.	
☐ Stand over of connection requapplicant.	red by the Council's contractor and physical works ca	arried out by the following contractor and billed to
Contractor name:		
Contact details:		
Traffic management plans and Corr	idor Access Requests are to be submitted to the Counc	il five days prior to work commencing.
Please indicate connection / alte	ration / disconnection applied for:	
Wastewater:		
☐ Single–Lot Connection	☐ Multi –Lot Subdivision Connection	☐ Disconnection
Stormwater:		
☐ Single–Lot Connection	☐ Multi –Lot Subdivision Connection	☐ Disconnection
Tradewaste:		
Requires a separate form – se information.	e https://tasman.govt.nz/my-property/water/was	tewater/trade-waste/ for forms and more
Comment on any detail	Is: (attach sketch plan or use space overleaf)	

The current Wastewater Bylaw stipulates the Council's and Customer's responsibilities when supplying and receiving a wastewater service. The full bylaw can be viewed on the Council's website: https://tasman.govt.nz/my-council/key-documents/more/bylaws-and-regulations/consolidated-bylaw/#e579

Liability for Fees and charges: Current fees and charges are here – https://tasman.govt.nz/my-council/fees-and-charges/					
(full name), am the owner of the Property and agree to pay all fees and charges that are payable to the Council for an approved connection / alteration to connection / disconnection. Any expense incurred by the Council in the course of recovering outstanding debts will be payable by the Applicant.					
Postal / Email Address for invoice:					
Signature:	_ Date:	/			
EOD OFFICE LISE ONLY					
FOR OFFICE USE ONLY	Dete		1		
Authorised by Utilities Manager Contractor Advised Date: / /	Date		/		
Contractor Advised Date:// Work completed date://		ed date:			
Rates Ledger noted date:/		noted date			
As- builts received date://					

