***All sections must be completed – mark N/A to any question that does not apply***

|  |  |
| --- | --- |
| **PROPERTY / PROJECT DETAILS** | |
| Owner (if known): | |
| Lot/Portion Number: | Address (including street number): |
| Suburb: | Permit Number: |

|  |
| --- |
| DESCRIPTION OF WORKS (length of urinal and size of all new drainage work to be included) |
| Plumbing |
| Drainage |
| Hydraulic Fire Services |

|  |  |  |  |
| --- | --- | --- | --- |
| DRAINAGE PLANS  (draw drainage layout below or provide the numbers of attached drawings)  V = Vent ORG = Overflow Relief Gully IO = Inspection Opening | RATEABLE FIXTURES | | |
|  | Type | Existing | New |
| WCs |  |  |
| Bidet |  |  |
| Baths |  |  |
| Showers |  |  |
| Basins |  |  |
| Kitchen Sinks |  |  |
| Laundry Troughs |  |  |
| Urinal |  |  |
| Tempering Valve |  |  |
| Solar HWS |  |  |
| Septic |  |  |
| Was the design completed by a certifying engineer hydraulic using an Alternate Solution? Yes No | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| CERTIFICATION BY PLUMBER & DRAINER | | | | |
| Company Name | | | Company NT Registration Number | |
| I certify that the plumbing and/or drainage works have been constructed in accordance with the certified drawings and the requirements of the *Building Act*. | | | | |
| **Name** (print clearly) | **Individual NT**  **Registration Number** | **Signature** | | **Date** |

Four copies of the certificate are required

(1) Building Certifier or Director (2) Owner (3) Power & Water Service Development at [waterdevelopment@powerwater.com.au](mailto:waterdevelopment@powerwater.com.au); or PO Box 37471 Winnellie NT 0821 (4) Plumber