APPLICATION FOR PLUMBING PERMIT / CERTIFICATE OF LIKELY COMPLIANCE – PLUMBING WORK

Section 156 Section 165

То:		Permit Authority Address Suburb/postcode	Form 3		
Applicant / Owi	ner details:				
Note: Only an owner	or agent of the owner may make an application	- -			
Owner:		Contact person:			
Address:		Phone No:			
		Fax No:			
Email address:					
Agent:		Contact person:			
Address:		Phone No:			
		Fax No:			
Email address:		-			
Note: Agents to be auth	orised in writing by the owner				
Details of plum	bing work:				
Address:		Lot No:			
		Certificate of t	itle No:		
The work:	Type of plumbing installation:	(water or sewerage reticulation / stormwater / roof plumbing / on-site waste water management system / backflow prevention device / other)			
	Brand / model:				
Use of building:		(main use: dwelling, shop, food business, factory)	Building class:		
Plumber details	s:				
Name:		Category:			
Address:		Phone No:			
		Fax No:			
Licence No.	Email address:				
Plumbing designer details:					
Name:		Category:			
Address:		Phone No:			
Addiess.		Fax No:			
		rax NO:			
Licence No.	Email address:				

Documents pro	ovided:		
The following docu	ments are provided with this applicat	ion -	
	Document description:	Pre	epared by:
3 Copies of docum Specified List:	ents specified in Schedule 2 of the Di	irector's	
	ork will be carried out in accord and the National Construction Co		t 2016, the Building