



Liquid Trade Waste Application Form

_____/____TW Classification A
Classification B

Postal Address: Locked Bag 155 Coffs Harbour NSW 2450
Phone (02) 6648 4000; Fax (02) 6648 4199; Email: coffs.council@chcc.nsw.gov.au
web: www.coffsharbour.nsw.gov.au
Administrative Centre: 2 Castle Street Coffs Harbour

This application form is for businesses that wish to discharge liquid trade waste to the sewerage system. The applicant can be either the property owner or the business owner. However Council prefers the applicant to be the person who has responsibility for the pre-treatment equipment or control over the day-to-day operations of the business. In conjunction with filling out this application form it is advised that you consult Council's website. Please fill out all pages and, ensure you sign and complete *Supporting Documentation* on page 4. When completed, please lodge this form with the payment of the application fee at Council. (Section 68, Local Government Act 1993)

1. Property Owner

Given Name/s: Surname:
Telephone: BH: AH: Mobile:
Fax: e-mail:

2. Waste Generator's Business Trading Name

Business Trading Name:
Trading Address: Unit: No.: Street:
Town/Suburb: Postcode:
Property Description: Lot: Section: DP/SP:

3. Applicant's Name

I am the (Please Circle) Property Owner, Business Owner My title: (Mr, Mrs, Miss, Ms Etc):
Given Name/s: Surname:
Postal Address: Unit: No.: Street:
Town/Suburb: Postcode:
Telephone: BH: AH: Mobile:
Fax: e-mail:

4. Site Contact Person

Site Contact Person (if different to the applicant, otherwise "As Above") (Title: Mr, Mrs, Miss, Ms Etc):
Given Name/s: Surname:
Telephone: BH: AH: Mobile:
Fax: e-mail:

5. Description of Business Activity

Description of Business Activity (eg: restaurant, hairdresser, pet shop, stone cutting, school, day care centre)

.....

Trading Commencement Date (Current property & business owner):/...../.....

Where attached residence, No. of Occupants:

(Where applicable)

	(Normal hours of trading)	(Average)	No. of Rooms:
Monday:	..... to	No. of Staff:	No. of Beds:
Tuesday:	..... to	No. of Staff:	No. Dining Seats:
Wednesday:	..... to	No. of Staff:	No. Meals per day:
Thursday:	..... to	No. of Staff:	No. Dental Chairs:
Friday:	..... to	No. of Staff:	No. of Buses:
Saturday:	..... to	No. of Staff:	No. of Students:
Sunday:	..... to	No. of Staff:	No. of Children:
Dishwasher: Make:	.....	Model:	
No. of dishwashers:		No. of loads per day:	Litres per load:

6. Water Supply

A. Meter Number: Number of Businesses served by meter:

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Percentage of Water Supply discharged to sewer (SDF): % or kl/day (Metered or Estimate):

B. Additional Water Source (Rainwater Tank, Bore, Re-Use etc):

Used for:

.....

Percentage of Water Supply discharged to sewer (SDF): % or kl/day (Metered or Estimate):

7. Description of Trade Waste Water Flow

List all processing and activities that generate Trade Waste (eg floor washing, parts degreasing, etc):

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.....

Type of flow (please circle): Batch Intermittent Continuous

Maximum flow rate of discharge to sewer: Litres/Hour or: Litres/Second

Discharge Meter Type (if fitted):

Location:

Percentage of Water Supply discharged to sewer (TDF): % or kl/day (Metered or Estimate):

8. Description of water usage not discharged into the sewer

List all processing and activities where water supply is used and not discharged to the sewer (eg watering of pot plants):

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Details of flow Meter (if fitted):

Location:

Percentage of Water Supply: % Or: kl/day (Metered or Estimate):

9. Existing and Proposed Pre-treatment Equipment

For businesses with multiple waste streams, it is recommended to photocopy page 3 (Questions 9, 10 & 11) and describe each waste stream separately: (e.g. Canteen, Lab)

(e.g. Sink strainers, Grease arrestor, Oil separator, Basket waste arrestor, Settlement pit, Silver recovery unit)

- 1. Type, Make and model:
 Number: Size: Volume: litres Maximum flow rate: l/hour
 If shared with other business, please nominate business:
- 2. Type, Make and model:
 Number: Size: Volume: litres Maximum flow rate: l/hour
 If shared with other businesses, please nominate:
- 3. Type, Make and model:
 Number: Size: Volume: litres Maximum flow rate: l/hour
 If shared with other businesses, please nominate:
- 4. Type, Make and model:
 Number: Size: Volume: litres Maximum flow rate: l/hour
 If shared with other businesses, please nominate:

10. Servicing of Pre-treatment Equipment (if applicable)

Servicing performed by:

Self Staff Contractor: at frequency (weeks):

DEC Licensed Contractor(s) that transport waste	Licence No.	Contact No.	Frequency
.....
.....

11. Location of the Sampling Point(s)

Location of sampling point(s):
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12. Supporting Documentation & Signature

The applicant should be aware that approval of this application does not constitute a guarantee of any future approval of a variation to the approval. This will be dependent on the available capacity of the sewerage system at that time and any future approval must not be assumed. However, alerting the Council to the applicant’s future plans and proposals may assist the Council in planning future sewage management and/or infrastructure additions/modifications.

The checklist will help you provide a complete application. If you answer all the questions and provide all the information as requested, we can deal with your application much more quickly.

Have you included the following details:

- Have you provided 2 copies of the installation plans;
- Site plan showing associated buildings, storm water drainage, detailing bunding, walls, roofs, fall of ground etc;
- Sewer Drainage Diagram;
- Trade Waste Drainage Plan showing: location of all processing tanks, pits apparatus; including; number, size, volume, flow rate, dimensions, material of manufacture and location of sampling point(s);
- Details of flow measurement devices installed or proposed;
- Material Safety Data Sheets (MSDS) for any chemical proposed to be used as part of trade waste process.
- Where meals are prepared on site, a copy of a menu.
- Where developing photographic film or paper, supply a copy of PURE data sheet log.

I apply for approval to discharge trade waste into the Council's sewer and declare that the information I have supplied is correct. I understand:

- More information may be requested.
- I am responsible to pay all fees and liquid trade waste charges.

Property Owner

Signature(s): Date:

Printed Name:

(Owner's authorisation to making the application is mandatory as per section 78, of the Local Government Act 1993)

Please note that the owner of the property will be billed for water supply, sewerage and liquid trade waste services provided and it is the owner's responsibility to pay such fees and charges within the period specified. The owner may arrange to recover such fees and charges through the lease arrangement between the owner and the waste generator.

NOTE: All information for this agreement is collected to process your application. Your information will be kept by Council and will be disposed of in accordance with the Local Government Disposal Authority. Under Privacy & Personal Information Protection Act (PPIPA) 1998, you are entitled to review your personal information at any time by contacting this Council and request any amendment to it.

Applicant / Waste Generator

Signature: Date:

Printed Name:

Position in Business:

13. Office Use Only

Property No.: Classification: A B C

Application fee: \$. Payment date: Receipt No.:

Site visit conducted: Application: Refused / Approved Date:

Commencement of discharge: Officer in charge: 30-6-09