

Form | 250.2018.478.3

Application to Transfer Approval to Operate On-site Sewage Management System Public Health and Environment

This form is to be completed by the **NEW OWNER** of a property. This form is to be used to transfer an operating approval into a new owner's name, for an existing On-Site Sewerage Management System with a current approval. If there is no current operating approval you will need to use the form, 'Application for Inspection On-site sewage management system'. A person who operates a system of sewage management without obtaining approval of council is guilty of an offence under s. 626 (3) of the Local Government Act 1993.

Owner Details

Name		Phone
Postal Address		Mobile
Town	State	Postcode
Email		

Property Details

Address of System		
Town	State	Postcode
Lot	Section	DP

On-site Sewage Management System Details

Current OpSM Number (if known)		
Type of Premise	<input type="checkbox"/> Domestic	<input type="checkbox"/> Non-Domestic
Type of System	<input type="checkbox"/> Dry Composting	<input type="checkbox"/> AWTS
	<input type="checkbox"/> Wet Composting	<input type="checkbox"/> Septic Tank & Trench
	<input type="checkbox"/> Other, please specify	

Number of persons occupying the building:

Date of last desludge (if known)

Service Details (if applicable)

Please provide details and a copy of the service agreement from your service agent:

Company / Service Agent:	ABN:
Postal Address:	Phone:

Owner Consent

I/We the undersigned hereby request a transfer of approval of operating approval of the above on-site sewage management system.

I/We understand that a transfer fee will be charged in accordance with Councils Schedule of Fees and Charges.

Owner Signature	Date
Owner Signature	Date

For further information or assistance on completing this form please contact Council.

Mail: PO Box 714 COOMA NSW 2630

Phone: 1300 345 345

Email: council@snowymonaro.nsw.gov.au

Web: snowymonaro.nsw.gov.au