

Septic Tank System Extension of Time Application Form

Environment Protection Act 1970

Please allow up to four (4) weeks for the processing of your application

Please note permits may be extended ONCE for a maximum of ONE year.

No additional extensions will be granted.

I / we the undersigned, hereby request an extension of time for our existing permit:

Permit Number	Expiry Date:	.					
And supply the following information							
Applicant Details							
Surname:		Title	Mr	Mrs	Miss	Ms	Dr
Given/ Christian Name:							
Street:	Town:						
State:							
Phone Numbers: Work:	Home:		1	Mobile:			
Email							
Property Owner/s							
Please note in the event of an ownership change a n	ew permit will be r	required, a	any exis	sting per	mit will b	e void	
Surname:		Title	Mr	Mrs	Miss	Ms	Dr
Given/ Christian Name:							
Street:							
State:	Postcode	:					
Phone Numbers: Work:	Home:			Mobile:			
Email							
Plumber Details							
Surname: Cor	mpany Name						
Given:		Licence	Numb	oer			
Street:	Town:						
State:							
Phone Numbers: Work:	N	Mobile:					
Email							

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LODDON SHIRE

Site Detaile							
Site Details	Lat Name Lat						
Crown Allotment::	Lot Number:	Size of Land					
Street Number: S	Street						
Township/Parish:		Postcode:					
Building Details							
I confirm that the building details have not changed from those contained within my original permit application							
Proposed System Details: Septic Tank Type							
I confirm that the proposed system details have not changed from those contained within my original permit application							
Proposed System Details: Disposal Field							
I confirm that the disposal field details have not changed from those contained within my original permit application							
Applicants and Owners Declaration – Final Inspection and Certificate to use							
I understand that my system once installed cannot be used until an inspection of the system has been carried out and a certificate to use the system has been installed.							
I understand that it is an offence under the Environment Protection Act 1970 for my system to be used without a Certificate to use having been issued and that a fine maybe imposed by Council.							
Applicant Signature		Date					
Print Name							
Owners Signature		Date					
Print Name							
Application Details – Applicant D	eclaration						
I declare that all information contained in this application is, to the best of my knowledge, true and correct.							
Applicant Signature		Date					
Print Name							
Offic Receipt Number: Date: e Use		Privacy statement					
Loddon Shire CouncilPersonal information collected by Council is held securely and used in accordance with the Privacy and Data Protection Act 2014. Council may disclose this information to other organisations if required or permitted by legislation. Should you wish to access or modify this information, please contact Council on (03) 5494 1200 or email loddon@loddon.vic.gov.auVeb:www.loddon.vic.gov.au							