

Information Privacy Act 2009. Burdekin Shire Council is collecting the personal information you provide on this form in accordance with the Water Supply (Safety and Reliability) Act 2008 for the purpose of processing your application. Your information will not be disclosed to a third party without your consent unless required or authorised by law.

Please Note:

An Annual Trade Waste Permit Fee may be applicable dependent on the business and the type of trade waste discharge to the sewer. If applicable, an annual invoice will be issued to and be payable by the Property Owner each financial year.

Name and Address of Property Owner

(MUST be signed by Property Owner)

Name: _____

Address: _____

Postcode: _____

Phone: _____ Fax: _____

Mobile: _____ Email: _____

Contact: _____

Signature: _____ Date: _____

Name and Address of Trade Waste Generator

(Owner of the business who is generating trade waste to the sewer)

Trading / Business

Name: _____

Business Premise

Address: _____

Postcode: _____

Postal Address: _____

*(If same as above,
please indicate)*

Postcode: _____

Phone: _____ Fax: _____

Mobile: _____ Email: _____

Contact: _____

Signature: _____ Date: _____

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Details of Trade Waste Discharge (Please specify)

Nature of Business / Industry / Trade conducted on business premise:
(For example: dentist, hair dresser, hospital, mechanical workshop, service station, etc.)

List all processes and activities conducted during regular operation of business where a discharge to the sewer is to occur:
(For example: mechanical workshop – engine wash down)

Proposed / Present method of Pre-Treatment Arrestor:

Type: _____

Brand: _____ Size: _____

Other information: _____

Location of proposed / present Pre-Treatment Arrestor:

(Please note: the location of the Pre-Treatment Arrestor must allow unobstructed access by Burdekin Shire Council)

Location of arrestor

- ☐ Inside Building
☐ Outside Building

Specific location: _____

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Maintenance of Grease Arrestor

(All Pre-Treatment Arrestors must be regularly cleaned, maintained and the residual waste removed by a licensed contractor)

Licensed Contractor employed for servicing and removal of residual waste in Pre-Treatment Arrestor:

Contractor Name: _____

Postal Address: _____

_____ Postcode: _____

Current Removal Frequency: ☐ Weeks - _____ ☐ Months - _____

Hours of Business Operations

	Open	Close
Monday:		
Tuesday:		
Wednesday:		
Thursday:		
Friday:		
Saturday:		
Sunday:		

Other Information

Area of Irrigated Gardens: _____

(If property is irrigated using automatic sprinklers only)

Number of Toilet Pedestals
installed on Premise: _____

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Declaration

(Signatures are required by all parties – Property Owner and Trade Waste Generator)

Property Owner:

I hereby declare that the information provided in this application is true and correct to the best of my knowledge.

Name (please print): _____

Signature: _____ Date: _____

Trade Waste Generator (Business Owner):

I hereby declare that the information provided in this application is true and correct to the best of my knowledge.

Name (please print): _____

Signature: _____ Date: _____

Please return the completed application and application fee of **\$78.00 to:**

Trade Waste Officer
Burdekin Shire Council
PO Box 974
AYR QLD 4807

PAYMENT OPTIONS

‡ In Person: 145 Young Street, Ayr
Monday to Friday
(8:00am to 5:00pm)
✉ Mail: PO Box 974
Ayr Qld 4807
☎ Phone: 4783 9800

OFFICE USE ONLY

Application Processed

Officer: _____ Date: _____

Trade Waste Permit No: _____ Property No: _____

Application Fee Received

Officer: _____ Date: _____

Receipt No: _____