



PO Box 90, ROLLESTON 7643
Tel: (03) 347 2800
Fax: (03) 347 2799

SELWYN DISTRICT COUNCIL

APPLICATION ONLY FOR SEWER LATERAL CONNECTION TO COUNCIL'S SEWER

I hereby apply for permission to connect to the _____ township sewer system.
The drainage to the sewer shall comply with the New Zealand Building Code 1992 and installation to
Council Main shall comply with Selwyn District Council's sewer lateral standard.

PROPERTY OWNER:

ADDRESS OF PROPERTY OWNER:

.....

ADDRESS OF PROPERTY:

.....

Telephone (hm):Telephone (cell):Email.....

LOT DP Valuation No

(This information can be obtained from your Rates Demand)

FEE STRUCTURE FOR SEWER CONNECTION BUILDING CONSENT:

Non refundable deposit of \$200.00 with any further costs being charged on Time and Cost basis.

Registered Drainlayer: Phone:

Note: No installation can proceed until the application has been approved

SIGNATURE OF OWNER/AGENT: DATE:

FOR COUNCIL USE ONLY:

Application approved Date

Installation checked by: Date

Entered onto rates by: Date