



A detailed site plan showing property boundaries, water services, & proposed works must be attached to this application

Applicant / Agent Details

Name Postal Address
 Phone
 Mobile
 Email Post Code

Property Information

Property Address
 Valuation No. / Assessment No.
 Legal Description
 Does the property have an existing point of supply? Yes No How many?
 Name of water supply
 Existing restricted allocation to the property No. of Units m³ / day
 Reason for Application / Additional Information

Property Owner Details *(If different from above)*

Name Postal Address
 Phone
 Mobile
 Email Post Code
If billing address different from above please advise

What is the purpose of this application?

New connection	<input type="checkbox"/>	Transfer of existing restricted allocation	<input type="checkbox"/>
Disconnection	<input type="checkbox"/>	Relocation of existing point of supply	<input type="checkbox"/>
New water meter	<input type="checkbox"/>	Increase / Decrease of existing restricted allocation	<input type="checkbox"/>
Upgrade of existing service line	<input type="checkbox"/>		

Is this application related to any of the following?

Sewer Connection Application	<input type="checkbox"/>	Reference No.	<input type="text"/>
Subdivision/Land Resource Consent	<input type="checkbox"/>	Reference No.	<input type="text"/>
Building Consent	<input type="checkbox"/>	Reference No.	<input type="text"/>

ASSETS UNIT

Please complete the relevant section below

If you are applying for a new restricted connection

No. of Units / m³ to Point # / Tank # (as shown on the attached plan)

If you are transferring existing water allocation

Total No. of Units / m³ to be transferred

No. of Units / m³ **from** Point # / Tank # (as shown on the attached plan)

No. of Units / m³ **to** Point # / Tank # (as shown on the attached plan)

If you are applying to increase / decrease your existing water allocation

No. of Units / m³ to be **increased** at Point # / Tank # (as shown on the attached plan)

No. of Units / m³ to be **decreased** at Point # / Tank # (as shown on the attached plan)

If you are applying for a disconnection

Note: *Disconnection* means the property will no longer attract water rates however disconnection fees apply & Development Contributions may apply upon reconnection.

Are you disconnecting a metered connection?

Yes

No

Meter Serial No.

1.

2.

3.

Please complete if the connection is intended for a non-residential activity

Is there a backflow prevention device at the boundary?

Yes

No

Don't know

If 'Yes', what type of device has been installed?

High

Medium

Low

What type of activity is proposed for the property?

Conditions and Notes

1. Submitting an application for water supply service does not imply automatic approval of an application.
2. Any approval granted is subject to the terms and conditions of the Waitaki Water Supply Bylaw 2021. It is the applicant's responsibility to read & understand the Bylaw, which is available on our website at www.waitaki.govt.nz or through Customer Services.
3. On-site storage equal to no less than 3 days' supply shall be installed on any property with a restricted connection from a Council water supply.
4. Installation of water connections to points of supply shall be carried out by Council's designated contractor or designated representative.
5. The supply shall be for the exclusive use of the identified property and no supply pipe shall cross into or supply any other property.
6. Council does not guarantee a continuous supply of water and reserves the right to restrict or impose restrictions on the use of the supply.
7. All fees and charges shall be paid prior to any works being carried out following assessment of this application.

Note:

A detailed site plan showing property boundaries, existing water services, and the proposed works must be attached to this application. The application will not be processed without a plan.

The preferred position of the connection, or the location of the connection to be removed / relocated, together with marked distances / measurements to the nearest boundaries **must** be shown on the plan (nominate street from which connection is to be taken if a corner site).

Applicant Declaration

I, the undersigned, hereby declare that the information given on this application is true and correct. I am authorised to make this application in the name of the legal owner and in doing so, accept the conditions of supply outlined in this application.

Name _____

Signature _____

Date: ____ / ____ / ____

Please return application to:

Waitaki District Council

20 Thames Street

Private Bag 50058

Phone (03) 433 0300

Fax (03) 433 0301

Email service@waitaki.govt.nz

Office Use: Plan Attached: Yes No Date Received: ____ / ____ / ____