



**CAIRNS REGIONAL COUNCIL
WATER & WASTE**

PO Box 359 CAIRNS QLD 4870
Phone: 1300 69 22 47

2019/2020

Application for Relocation / Renewal of Water Service Pipes for Commercial and Rural

Prior to lodgement of this application, please contact Cairns Regional Council to obtain a free quote for the works to be carried out. Once the quote is accepted by the owner/applicant, complete this form, attach a copy of the quote and lodge with relevant fees to Cairns Regional Council. We endeavour to carry out the works within 20 business days from the date of receipt.

I hereby apply for the Relocation / Renewal of the water service to the premises detailed below:

<p>1. Description of Land</p> <p>The lot & plan details (e.g. SP/RP) are shown on title documents or a rates notice.</p>	<p>Street address (include no., street, suburb / locality & postcode)</p> <div style="border: 1px solid black; height: 40px; margin-bottom: 5px;"></div> <hr style="border-top: 1px dashed black;"/> <div style="border: 1px solid black; width: 100%; text-align: right; padding-right: 5px;">Postcode</div>
<p>2. Owner / Applicant Details</p> <p>Please Note:</p> <p>I, the undersigned, hereby accept the quote provided by Cairns Regional Council Water & Waste to carry out on my behalf the works and/or services described hereunder and have attached a copy of the quote.</p> <p>The property owner is to arrange for the reconnection of their property water service to the relocated water service outlet point by a private plumber at their own cost.</p>	<p>Name of Owner / Applicant</p> <div style="border: 1px solid black; height: 20px; margin-bottom: 5px;"></div> <p>Postal Address</p> <div style="border: 1px solid black; height: 40px; margin-bottom: 5px;"></div> <hr style="border-top: 1px dashed black;"/> <div style="border: 1px solid black; width: 100%; text-align: right; padding-right: 5px;">Postcode</div> <p>Phone No. Mobile No.</p> <div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div> <p>Signature/s Date</p> <div style="border: 1px solid black; width: 100%; height: 20px; margin-bottom: 5px;"></div>
<p>3. Checklist</p>	<p>Applications will not be accepted unless the three (3) items listed are completed and attached; please indicate completion by marking the boxes provided.</p> <div style="border: 1px solid black; padding: 5px;"> <input type="checkbox"/> Completed Application Form <input type="checkbox"/> Quote <input type="checkbox"/> Quoted Fee </div>

Diagram of Block Showing Relocation

Please indicate the existing location of the meter and the proposed new location as viewed from the street



Office Use Only

Quoted Fee:		Receipt Code: 639 (Commercial)		Date Paid:		Receipt #:	
Parcel #:		Assessment #:		Work Order #:		CSO Name:	

Cairns Regional Council – Information Privacy Statement

Your personal information has been collected for the purpose of assessing your application for Relocation/Renewal of Water Service Pipes for Commercial and Rural. You are providing personal information which will be used for the purpose of delivering services and carrying out council business. Your personal information is handled in accordance with the Information Privacy Act 2009 and will be accessed by persons who have been authorised to do so. Your information will not be given to any other person or agency unless you have given us permission to or the disclosure is required by law.