



GEORGE TOWN COUNCIL

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APPLICATION FOR PLUMBING PERMIT / CERTIFICATE OF LIKELY COMPLIANCE – PLUMBING WORK

Section 156
Section 165

To: *Permit Authority*
 Address
 Suburb/postcode

Form **3**

Applicant / Owner details:

Note: Only an owner or agent of the owner may make an application

Owner/Agent: Contact person:
Address: Phone No:
 Fax No:

Details of plumbing work:

Address: Lot No:
 Certificate of title No:
The work: *(water or sewerage reticulation / stormwater / roof plumbing / on-site waste water management system / backflow prevention device / other)*
Type of plumbing installation:
Brand / model:
Use of building: Building class:

Plumber details:

Name: Category:
Address: Phone No:
 Fax No:
Licence No. Email address:

Documents provided:

The following documents are provided with this application -

<i>Document description:</i>	<i>Prepared by:</i>

The plumbing work will be carried out in accordance with the **Building Act 2016**, the **Building Regulations 2016** and the National Construction Code.

Owner / Agent: *Name: [print]* *Signed* *Date*
(Delete one not applicable)