



South Gippsland
Shire Council

Septic Tank Decommissioning Notification

Property Address

Street Address *					
Suburb/Town *		State *		Postcode *	
Lot no:		LP/CP		CA/Section	

Plumbers/Drainers Name:

Title *		Surname *		Given Names *	
Mobile *				Licence Number	
Email address *					

Septic system type:

Tick selected option	Design details				
<input type="checkbox"/>	Primary	Tank material:	Concrete / Plastic	Capacity (L):	
<input type="checkbox"/>	Secondary	Model Name:			

Septic System Decommissioning Works Completed:

- Pumped, cleaned, collapsed and filled with clean fill.
- Pumped, pressure cleaned, disinfected and left in the ground for stormwater.
- Pumped, pressure cleaned, disinfected and removed for re-use.
- Copy of Pump Out Receipt Attached

* Required information

Declaration

I hereby certify that the above wastewater system has been decommissioned by me in accordance with the requirements of the EPA Code of Practice Onsite Wastewater management.
This application forms a legal document and penalties exist for providing false or misleading information.

Plumber/Drainers Name *		Date *	
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Signature of Plumber/Drainer *
