

**NOTICE OF WORK**  
**for Plumbing and Drainage Work**  
*Please supply requested information correct and neatly*

DA No \_\_\_\_\_

**PROPERTY & OWNER DETAILS**

House No. _____	Street _____	Suburb _____	Postcode _____
Lot No. _____	DP No. _____	PDP or SP _____	Nearest Cross Street _____
Municipality/Shire _____		Owner's Name _____	
Full Address _____		_____	

**LICENSEE'S DETAILS**

Full Name _____	Address for Notices _____		
Phone No. _____	Qualified Supervisor No. _____	Expiry Date DD MM YYYY	
	Licence No. _____	Expiry Date DD MM YYYY	

**WORK OF WATER SUPPLY**

Give full Description of Work carried out

<input type="checkbox"/> Install Water Supply	_____
<input type="checkbox"/> Install Irrigation system	_____
<input type="checkbox"/> On-site Alternative Water Services	_____
<input type="checkbox"/> Install/Commission/Maintenance of Thermostatic Mixing Valve	_____
<input type="checkbox"/> Connection to water supply	_____
<input type="checkbox"/> Install, alter, disconnect or remove a backflow prevention device	_____
<input type="checkbox"/> Other	_____
	_____
	_____
	_____

**PLUMBING WORK TO COMPLY WITH**    ☐ **AS/NZS3500**    ☐ **ALTERNATIVE SOLUTION**    ☐ **COMBINED**

**WORK OF SANITARY PLUMBING/DRAINAGE AND SUPPLY DRAINAGE PLAN**

Give full description of work carried out

<input type="checkbox"/> Carry out work of sanitary plumbing/drainage	_____
<input type="checkbox"/> Connection to Sewer	_____
<input type="checkbox"/> Sewer Disconnection	_____
<input type="checkbox"/> Carry out Trade Waste Drainage	_____
<input type="checkbox"/> Other	_____
	_____
	_____
	_____

**DRAINAGE WORK TO COMPLY WITH**    ☐ **AS/NZS3500**    ☐ **ALTERNATIVE SOLUTION**    ☐ **COMBINED**

**SEWERAGE/WATER SERVICE INSPECTION FEE**

Date Fee Paid DD MM YYYY	Date of Commencement of Work DD MM YYYY	Estimated Date of Completion DD MM YYYY
Amount \$ _____	Reference No: _____	Contractors Signature _____

1. This is your notification that you, as the Responsible Person, intend to carry out the work described on this 'NOTICE OF WORK', in accordance with provisions of the Regulators Act, Regulations, Codes and Standards.
2. This NOTICE TO WORK must be produced on the request of any person duly authorised by the REGULATOR.
3. The corresponding numbered CERTIFICATE OF COMPLIANCE must be submitted by you to the Local Regulator on the completion of a FINAL INSPECTION on the above work.

*Please supply requested information correct and neatly*

SEWERAGE/WATER SERVICE INSPECTION FEE									
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DD MM YYYY			DD MM YYYY			DD MM YYYY			
Amount			Reference No:			Contractors Signature			
\$									

1. In respect of authorised work carried out by me at the above mentioned property I certify that:
- i. The work corresponds to the specifications in the notice of work.
  - ii. The completed work has been tested as required by the Regulator and has passed such test;
  - iii. Where required by Section 11 of the Plumbing and Drainage Act 2011, I have given written notice of any identified pre-existing defective plumbing and/or drainage work..... Yes ☐ N/A ☐
  - iv. The work complies with the relevant Acts, Regulations, Codes and Standards;
  - v. The work was completed on \_\_\_\_/\_\_\_\_/\_\_\_\_ Contractors Signature \_\_\_\_\_
2. If any defect is found in the work carried out by me within a period of two (2) years or within the time specified by Regulator, from the date of the final inspection, and the Regulator for Plumbing and Drainage certifies by written notice that in their opinion the defect is due to faulty workmanship or defective materials, then I undertake to rectify such work at my sole expense, if so directed by the Regulator within the time specified by the Regulator.

**CERTIFICATE OF COMPLIANCE**  
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**LICENSEE'S DETAILS**

Full Name	Address for Notices		
Phone No.	Qualified Supervisor No.	Expiry Date	
		DD	MM YYYY
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