

Certification of Decommissioning of an Effluent Disposal System

I, _____
(Name of Licensed Liquid Waste Contractor or Demolition Contractor)

of _____
(Address)

hereby declare that the septic system previously installed on Lot No ____ House No ____

Street _____ Suburb _____

was decommissioned on ___/___/___ in accordance with the provisions of Regulation 21 of the
Health (Treatment of Sewage and Disposal of Effluent and Liquid Waste) Regulations 1974.

Please Tick Appropriate Boxes

- Septic tanks, leach drains or soak wells have been pumped out by a Licensed Liquid Waste Contractor and disposed of at an approved site.
- Empty septic tanks, leach drains and soak wells have been removed from site and been backfilled with clean sand and compacted.

OR

- The lids have been removed and the bottom of the septic tanks broken up. The septic tanks, leach drains and soak wells have been backfilled with clean sand and then compacted.
- Copy of the receipt from the Liquid Licensed Waste Contractor is attached to this form.

Please Complete Below Details

Total Number of Septic Tanks Removed: _____

Dimensions of any Rectangular Septic Tanks Removed: _____

Number of Effluent Disposal Soak Wells / Leach Drains Removed: _____

(Signature of Applicant)

(Date)