Telephone: (08) 8939 2200 Facsimile: (08) 8987 2451 Email: office@ncl.net.au

ABN: 57 009 596 598

nhulunbuy corporation

Application for Building, Plumbing and Drainage Approval

OFFICE U	USE ONLY	BA Numbe	r								
APPLICANT	DETAILS										
Name							Appl	icatio	n Date		
Postal Address	,						•				
Phone Bus No				N	lobi	ile P	hone No	•			
Email Address	3										
DETAILS OF	PROPERTY										
Lot No.					St	treet	No.				
Address											
LESSEE/SUF	LESSEE OF I	PROPERTY can Gove [RTAG] p	ropei	rties n	nust	be a	uthorised	by the	property	owner)
RTAG proper	Y			Ye	S				No		
	property - Name	e of sub-lease		•							
holder:			Approval Letter obtained Yes Attach copy if y			es [No				
Postal Address	S						Phone				
Email							Mobile	No.			
TYPE OF BU	ILDING WOR	K								Tic	k here $\sqrt{}$
Group 1 Minor Works (Refer to Type of building works sheet for specific scope of works) Group 2 (Refer to Type of building works sheet for specific scope of works)	installations; al fencing; retaining	carports & garden pove-ground swiming walls; satellite ss or additions includes; verandahs; perg	ming dish udin	g poo es; fl	ols; sagp	shad oles	le sails; detc.	rivew	ays;		

nhulunbuy corporation

es,
dance ifier hority ng the
ition Removal
sqm
24
s
i

nhulunbuy corporation

BUILDER DE	ETAILS						
Firm or Com	pany name						
Registrat	ion No.				Mobile No).	
Email A	ddress				Phone No		
Postal A	ddress				•		
PLUMBER D	ETAILS						
Name of Plum	ber/Designer	r					
Registrat	ion No.				Mobile No).	
Email A	ddress				Phone No		
Postal A	ddress						
Septic Tank	Installation	Yes□ No□	If yes - Source of eg mains/bore			Size of Septic Tank	litres
ACKNOWLEDGEMENT I acknowledge that all works undertaken will conform to the requirements of the current National Construction Code of Australia, the conditions of the Building Permit and the Standard Planning Development Building and Demolition Conditions. Any building work as described in Group 3 or 4 must be certified by a registered building certifier for the Northern Territory (including relevant Section 40 Design Certificates, NTFRS & other Regulatory Authority Report). Any damage caused to services or mains water infrastructure is my responsibility. Any proposed works which fall within the scope of the Construction Industry Long Service Leave and Benefits Act must be notified to NT Build by lodgement of the required Project Notification Form. Payment of any levy must be made prior to the commencement of any construction activity. NT Build should be contacted via email http://www.ntbuild.com.au/ntbuild/publications forms/sitealert changesto-NTBuild 201404.pdf or by phone on 08 89364070 to determine if the proposed works are subject to the Act Details of this building application may be passed onto the Australian Bureau of Statistics for the purpose of publishing aggregated statistics. APPLICANT TO SIGN							
		Signature				Dat	0
		Jigilature				Dat	C
PAYMENTS D	ETAILS	<u>OFI</u>	FICE USE	<u>ONLY</u>			
Amount Paid \$	S	I	Receipt No.		Paym	ent Date	
BUILDING AP	PROVAL						
Granted	Notes:			Refu	used Notes:		

PO Box 345 Nhulunbuy NT 0881 Australia

Telephone: (08) 8939 2200 Email: office@ncl.net.au

nhulunbuy corporation

ABN: 57 009 596 598

Application for Water Supply / Sewer Connection			BA Number					
I am applying to have the following connections			Water □ Sewer □			ver □		
Property Address Lot No: Street No & Nan			ne		·			
Property Owner								
Water Connection Details								
Select the nearest situation to this property								
1.	Corner Posit	ion	[: I:					
2.	On straight of street							
3.	End of Close)		1.	/	}		
4.	On Bend							
	Please indica preferred wa location.		2.	3.		4.		
Water Meter Fee – Refer to Schedule of Fees & Charges								
	20mm 🗆		25mm 🗌	40r	nm 🗆		50mm 🗌	
Note Inter Diameter	nal			Paid in Building Application:	□ Yes		□ No	
NC inspector Drawings	tor to conf	irms sighted p	lumbing	Water Fixtures Assessed	Water Fixtures Assessed			
			Signature:		Date:			

PO Box 345 Nhulunbuy NT 0881 Australia

Telephone: (08) 8939 2200 Email: office@ncl.net.au

nhulunbuy corporation

ABN: 57 009 596 598

Sewer Connection Details						
NC inspector to confirm Drawings	ns sighted plumbing	Sewer Fixtures Assessed				
Number of Sewer Fixtu	res	Previous	New			
		Signature:	Date:			
Office Use Only						
Date Received:		Receipt:				
Infrastructure:	Name:	Date:				
Water Meter No:		Start Reading:				
Sewer:						
Plumbers Name		Signed:				
Finance	Rates Service Charges Updated:					

PO Box 345 Nhulunbuy NT 0881 Australia

Telephone: (08) 8939 2200 Facsimile: (08) 8987 2451 Email: office@ncl.net.au

nhulunbuy corporation

ABN: 57 009 596 598

CYCLONE MANAGEMENT PLAN

A Cyclone Management Plan is require months of November and May (inclusivareas.							
Name of Applicant / Representative:	Phone:	Date:					
Registered Name of Company / Organisation Conducting Works:							
Description of Proposed Works:							
Location of Proposed Works:							
Within A	CYCLONE WATCH 8 hrs but not expected within 24 h	re					
□ Advise employees of cyclone s	•	15					
□ Check fuel levels in all vehicle							
□ Tie down all loose items and remove all loose rubbish to local refuse tip							
□ Ensure that all machines and all vehicles are fully fuelled and operational							
	CYCLONE WARNING						
	Expected within 24 hrs						
□ Advise employees of cyclone status							
	□ Move all vehicles and machinery to a safe area						
☐ Monitor radio and/or social me	dia for updates						
<u>ACTIV</u>	ATION - CYCLONE IMMI	<u>NENT</u>					
— Advise employees of evelope	Expected within 12 hrs						
Advise employees of cyclone s Brief all staff and stand down f							
 □ Brief all staff and stand-down for home preparation □ Lock all gates and secure site 							
□ Lock all gates and secure site □ Move to a safe shelter							
	ALL CLEAR						
Advise employees of evelens							
Advise employees of cyclone status Chock all equipment and vehicles before resuming work							
 □ Check all equipment and vehicles before resuming work □ Check for any damage at work site 							
□ Report damage to work site/vehicles and/or machinery to Nhulunbuy Corporation							
	a. masimisty to initialization	., - 3. - 3. - 3.					
I have read and understood the requirer	nents and provisions of this plan.						
Applicant / Representative:	Signed						
	Name						
	Date:						