

Domestic Waste Water Management Planning Checklist On-Site Wastewater Disposal



Please note this form MUST be completed by a licensed plumber or drainer and returned to Council within 30 days of receipt. If the plumber/drainer identifies any issues that may impact on the operation of the system, Council's Environmental Health Department will investigate the issue and may require the owner to carry out works.

▼ Property Details

Property Owner:			
Property Address:			
GPS Coordinates:			
Date:		Time:	

▼ System Type

☐ 3200L all Waste Septic System with Disposal Trenches

☐ All Waste Aerated Wastewater Treatment Plant with subsurface irrigation

☐ Split grey and black water systems

☐ All Waste Sand Filter System

☐ Other (Please describe)

SPLIT SYSTEM:

Septic Tank/s located:				<input type="checkbox"/> Yes	<input type="checkbox"/> No
Condition:					
Grey Water Tank or Grease Trap Located (circle which one):				<input type="checkbox"/> Yes	<input type="checkbox"/> No
Black Water Trench Located:				<input type="checkbox"/> Yes	<input type="checkbox"/> No
Any Odour:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Any Surface Discharge	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Number of Lines:		Length:			
Grey water disposal located:				<input type="checkbox"/> Yes	<input type="checkbox"/> No
Surface:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Sub-surface:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Any Odour:				<input type="checkbox"/> Yes	<input type="checkbox"/> No
Surface/Storm waters directed away from disposal field:				<input type="checkbox"/> Yes	<input type="checkbox"/> No
All wastewater discharging within property boundaries:				<input type="checkbox"/> Yes	<input type="checkbox"/> No
Obstructions over tank or lines:				<input type="checkbox"/> Yes	<input type="checkbox"/> No
Sufficient Setbacks:				<input type="checkbox"/> Yes	<input type="checkbox"/> No
Distribution pits adequately sealed, not damaged and working efficiently:				<input type="checkbox"/> Yes	<input type="checkbox"/> No

Details/Notes:

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ALL-WASTE SEPTIC SYSTEM (3200L)					
Septic Tank Located:				<input type="checkbox"/> Yes	<input type="checkbox"/> No
Good Condition:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Any Odour:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Aggi Lines located:				<input type="checkbox"/> Yes	<input type="checkbox"/> No
Distribution pits in good condition:				<input type="checkbox"/> Yes	<input type="checkbox"/> No
Number of lines:			Length:		
Any surface discharge:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Any Odour:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Obstructions over tank or lines:				<input type="checkbox"/> Yes	<input type="checkbox"/> No
Surface/Storm waters directed away from disposal field:				<input type="checkbox"/> Yes	<input type="checkbox"/> No
All wastewater discharging within property boundaries:				<input type="checkbox"/> Yes	<input type="checkbox"/> No
Sufficient Setback:				<input type="checkbox"/> Yes	<input type="checkbox"/> No
Details:					

SECONDARY TREATMENT – TREATMENT PLANT OR SANDFILTER					
Sand Filter or Treatment Plant: (circle which one)			Brand: (if visible)		
All parts of system located:				<input type="checkbox"/> Yes	<input type="checkbox"/> No
Appears to be working Properly:				<input type="checkbox"/> Yes	<input type="checkbox"/> No
Signs of problems/neglect:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Any Odour:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Discharge Method:			Size:		
Disposal located:				<input type="checkbox"/> Yes	<input type="checkbox"/> No
Micron Filter:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Valves located: (Drippers)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Any surface discharge:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Any Odour:	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Surface/Storm waters directed away from disposal field:				<input type="checkbox"/> Yes	<input type="checkbox"/> No
All wastewater discharging within property boundaries:				<input type="checkbox"/> Yes	<input type="checkbox"/> No
Obstructions over system/disposal lines:				<input type="checkbox"/> Yes	<input type="checkbox"/> No
Sufficient setbacks:				<input type="checkbox"/> Yes	<input type="checkbox"/> No
Details:					

ADDITIONAL COMMENTS:	

▼ Plan

Include where present: (Drawing does not have to be to scale but all distances should be shown on map)

- ☐ All parts of wastewater treatment system by including: Tanks, treatment systems, distribution pits, inspection points, land application area and dimensions of lines
- ☐ House/Dwelling
- ☐ Setback distances to: Buildings, boundaries, side cuts, waterways, bores
- ☐ Driveways and roads
- ☐ Drainage and stormwater infrastructure
- ☐ Fall of land
- ☐ Position of North

[illegible]