APPLICATION FOR WASTEWATER SYSTEMS AND RECYCLED WATER SCHEMES FOR TOWNS, SUBDIVISIONS AND COMMUNITIES



This application form is for the following types of wastewater system installations:

- Towns/townships wastewater collection and/or treatment
- Small communities/shack sites wastewater collection and/or treatment
- Aboriginal communities and homelands wastewater collection and/or treatment

ABN 97 643 356 590

Wastewater Management Section **Health Protection & Licensing Services** Citi Centre Building, Level 4 11 Hindmarsh Square ADELAIDE SA 5000

PO Box 6 **RUNDLE MALL SA 5000**

Tel: (08) 8226-7100 Fax: (08) 8226-7102

Email:

healthwastewatermanagement@sa.gov.au

- New developments/subdivisions wastewater collection and/or treatment
- Tourist developments wastewater collection and/or treatment
- Domestic wastewater of industrial/commercial development
- Extensions to existing schemes/systems wastewater collection and/or treatment
- Recycled water irrigation systems associated with a wastewater treatment plant (municipal, vineyards, woodlot etc.)
- Supply of recycled water from a wastewater treatment plant for customer use

For application of recycled water use ONLY please use the form for Restricted Irrigation.

PLEASE PRINT CLEARLY

TYPE OF WASTEWATER SYSTEM INSTALLATION

THIS APPLICATION IS FOR: (Pl	ease tick appropriate boxes)	
☐ Collection of was	tewater	
☐ Treatment of was	tewater	
☐ Use of recycled w	rater	
☐ Effluent subsurfa	ce disposal	
For the following: (please specij	fy name or area)	
☐ Town / township (please speci	fy)	
☐ Small community / shack site (please specify)		
☐ Aboriginal community / homeland (please specify)		
☐ New development / subdivision (please specify)		
☐ Tourist development (please specify)		
□ Domestic wastewater of industrial / commercial development (please specify)		

☐ Other (pl	ease specify)
This scheme	is:
	☐ Extension to existing scheme (please specify)
	☐ Upgrading of existing scheme (please specify)
	☐ A new scheme (please specify)
	WASTEWATER TECHNOLOGY USED
From the list	of technologies below, please indicate the options proposed in your application for:
	1. Collection system
	 Treatment system and Recycled water reuse
(Dlease tick i	appropriate boxes)
•	ON SYSTEM:
	☐ Sewerage system (raw sewage collection, no septic tanks) with gravity sewers only
	☐ Sewerage system with pumped and gravity lines in the network
	□ Pumped raw sewage from individual connections to common main(s)
	□ Septic tank effluent drainage - by gravity
	□ Septic tank effluent drainage - pumped and gravity lines in the network
	☐ Pumped septic tank effluent from individual connections to common main(s)
	□ Vacuum collection
2. TREATME	:NT SYSTEM:
	☐ Primary treatment
	☐ Lagoon system (please specify)
	□ Activated sludge
	☐ Intermittent Decanted Extended Aeration (IDEA)
	☐ Sequencing Batch Reactor (SBR)
	☐ Attached media system such as trickling filter, rotating bio-reactor
	☐ Membrane Bioreactor (MBR)
	☐ Filtration system (sand, micro filtration etc.)
	☐ New technology (please specify)
	☐ Nutrient removal
	☐ Combination of any of the above (please specify)
3. RECYCLEI	O WATER REUSE:
	☐ Municipal irrigation (please specify)
	☐ Crop irrigation (please specify crop)
	☐ Passive usage / ornamental
	☐ Other non-potable use (please specify)
	☐ Off-site disposal (please specify)

(Please tick the irrig	gation option proposed in your application)
☐ Surface irri	gation
	☐ Spray
	☐ Drip
	☐ Other (please specify)
☐ Subsurface	disposal / irrigation
	☐ Shallow subsurface irrigation
	☐ Soakage trench
	☐ Soakage bed
	☐ Other (please specify)
	APPLICATION DETAILS
NAME & DESCRIPTION OF S	SYSTEM FOR APPROVAL:
	INSTALLATION ADDRESS / LOCATION
	INSTALLATION ADDITION
Street	Township or Suburb
Street Number	Lot or Pt. Lot Number
Where the installation is no	t located in a defined township, please provide a location plan with clear
directions and the following	ı information:
Hundred of	Section or Pt. Section
	APPLICANT DETAILS
Applicant name:	Contact
Applicant name.	Contact:
Address:	
Phone:	Fax:
Email:	Mob No.:

IF REUSE IS BY IRRIGATION:

OWNER DETAILS (if different from the applicant) Owner name: _____ Contact: _____ Phone: ______ Fax: _____ Email: _____ Mob No.: ____ OPERATOR DETAILS Operator name: ______ Contact: _____

APPLICATION REQUIREMENTS

Phone: ______ Fax: _____

Email: Mob No.:

IMPORTANT: PLEASE ATTACH FULL DETAILS FOR ITEMS LISTED BELOW (WHERE APPLICABLE)

- Concept report explaining the application and its purpose, taking into account information required with this form. Relevant Codes and Standards used for the design must be specified. The concept report is required for ALL applications.
- Technical details of the proposed collection, treatment and recycled water reuse technology (whichever is applicable) and proposed design for the system as a whole and for each component including details of the function served by each mechanism.
- Engineering calculations used to establish the design and size of the system/scheme and the components within the scheme, such as sizes of pipework, tanks, chambers, pumps, aerators, filters or any other equipment used. Please provide references to any standards or codes used to design and size the system and any assumption made in the design.
- Technical specifications including the name, make, model, size, description, function, location, material used, classification, duty, capacity, type of all the components and equipment within the
- Engineering report and/or calculations for the structural soundness of the system/scheme and its components.
- A set of engineering drawing(s), both plan views and cross sectional drawings of the system, as a whole and for each of its components (whichever applicable), such as:
 - Collection system

- Treatment system
- Major components
- Recycled water irrigation system and/or other reuse scheme
- Total overall scheme

The above drawings should include all dimensions of components, including (where relevant) pipework, tanks, motors, compressors, pumps, valves, diffusers, venturi, media, media fittings, disinfection systems, scum and sludge collection, baffles, partitions, electrodes, float switches, control panels and alarms.

- Soil assessment for recycled water irrigation or disposal site and other site characteristics including proximity to housing, public areas, roads, watercourses and the marine environment and irrigation application methods and irrigation system technical design details. In addition a simple risk management plan is required for recycled water systems (see application form for "restricted irrigation").
- Design and technical specifications of recycled water reuse system (irrigation, disposal or other) including pipes, pumps, pump sumps and any other equipment or tank lagoon etc. and their installation and operation methods.
- A schematic plan/flow diagram of the overall scheme, including the collection system, treatment plant and recycled water irrigation/reuse system where applicable.
- 10. Copies of the servicing manual, operating manual and the recommended service details required for the maintenance of the system and its components.
- 11. Contingency measures for malfunctions of the scheme and its components.
- 12. Any further information relevant to the application for approval.
- 13. Any evaluation report from any appropriate authority, detailing the performance of the system/scheme against the test criteria. This may include Any appropriate laboratory analysis reports produced by laboratories which have National Association of Testing (NATA) certification (where applicable and/or available):

AND/OR

Any product certification documentation from an independent product certification agency accredited by JAS/ANZ (where applicable and/or available)

AND/OR

Any other assessment or accreditation report for the system/scheme

14. Where the application is for a collection system extension for an existing scheme, please provide written confirmation from the owner of the scheme indicating that they are satisfied with the proposal, that their system has adequate capacity to accept additional flows and that they are satisfied that any specific design criteria required by the owner of the scheme have been addressed. Scheme owner design criteria requirements must be provided with the application and the scheme owner should include the drawings numbers assessed in their confirmation letter.

Note: Standard processing time for applications is between 4 and 6 weeks provided that the application is accurate and complete. Failure to provide all relevant information will result in delays in the assessment and approval of the application. Multiple re-submissions may result in refusal of the application resulting in an additional application fee.

All reports and drawings forming the submission must be dated and version controlled.

The application fee is \$533 for the 2022-23 financial year. Once the application is received a Bpay invoice will be issued. Alternatively the fee can be paid via cheque or money order.

Note: The application will not be assessed until the fee has been received.

Please fill in the declaration at the end of this form after reading the "Application Requirements" section above.

DECLARATION BY APPLICANT

I supply the following details with my approval application for the wastewater system detailed above

(Ti	ick as included):	
	Application fee (payable to the Department for Health and Wellbeing) or request for invoice	
	Concept report of the project (required for ALL applications)	
	Description and technical details of the proposed system and its components	
	Engineering calculations regarding the design and sizing of all the components of the system	
	Technical specifications for all the components within the scheme	
	Soil and site assessment for the recycled water irrigation or disposal site	
	Engineering report and/or calculations regarding the structural soundness of the scheme	
	Plan-view engineering drawings	
	Cross-sectional engineering drawings	
	Schematic Plan of the overall system	
	A copy of the servicing manual/details	
	A copy of the operation manual/details	
	Contingency measures for malfunctions of the system	
	Laboratory analysis reports (NATA registered) (where available)	
☐ Additional information (where available)		
informa	t failure to supply all the details referred to in this application form and/or any additional tion requested by the DHW concerning my application may result in delays in processing or refusal oplication.	
POSITIO	N:COMPANY:	
ADDRES	S:	
SIGNATI	JRE: DATE:	
A DDI ICA	TIONS CAN BE EMAILED TO:	
APPLICA	HealthWastewaterManagement@sa.gov.au	
IE ENANII		
IF EIVIAII	L IS UNAVAILABLE, APPLICATIONS MUST BE ADDRESSED TO:	
	Wastewater Management Section Health Protection & Licensing Services Department for Health and Wellbeing PO Box 6	

RUNDLE MALL SA 5000