

**Regulator's Copy** 

Serial No A 000001

## CERTIFICATE OF COMPLIANCE

for Plumbing and Drainage Work

Please supply requested information correct and neatly

|                                                                                                                     | I                                  | PROPERTY & OWNER DETAILS                                                     |                                                          |
|---------------------------------------------------------------------------------------------------------------------|------------------------------------|------------------------------------------------------------------------------|----------------------------------------------------------|
| House No Street                                                                                                     |                                    | Suburb                                                                       | Postcode                                                 |
| Lot No DP No                                                                                                        | PDP or SP                          | Nearest Cross Street                                                         | Municipality/Chiro                                       |
| Lot No DP No                                                                                                        |                                    |                                                                              | Municipality/Shire                                       |
| Owner's Name                                                                                                        |                                    | Full Address                                                                 |                                                          |
|                                                                                                                     |                                    |                                                                              |                                                          |
|                                                                                                                     |                                    | LICENSEE'S DETAILS                                                           |                                                          |
| Full Name                                                                                                           |                                    | Address for Notices                                                          |                                                          |
| Phone No.                                                                                                           |                                    | Qualified Supervisor No.                                                     | Expiry Date                                              |
|                                                                                                                     |                                    |                                                                              |                                                          |
|                                                                                                                     |                                    | Licence No.                                                                  | Expiry Date                                              |
|                                                                                                                     |                                    |                                                                              | DD MM YYYY                                               |
|                                                                                                                     |                                    | WORK OF WATER SUPPLY                                                         |                                                          |
| Give full Description of Wo                                                                                         | ork carried out                    |                                                                              |                                                          |
| <ul> <li>Install Water Supply</li> <li>Install Irrigation system</li> </ul>                                         | 1                                  |                                                                              |                                                          |
| On-site Alternative Wa                                                                                              |                                    |                                                                              |                                                          |
| Install/Commission/Ma                                                                                               |                                    | mostatic Mixing Valve                                                        |                                                          |
| Connection to water su                                                                                              |                                    |                                                                              |                                                          |
| <ul> <li>Install, alter, disconnec</li> <li>Other</li> </ul>                                                        | t or remove a back                 | ckflow prevention device                                                     |                                                          |
|                                                                                                                     |                                    |                                                                              |                                                          |
|                                                                                                                     |                                    |                                                                              |                                                          |
|                                                                                                                     |                                    | AS/NZS3500 ALTERNA                                                           |                                                          |
|                                                                                                                     | -                                  |                                                                              |                                                          |
| Give full description of wor                                                                                        |                                    | PLUMBING/DRAINAGE AND SUPPL                                                  | Y DRAINAGE PLAN                                          |
| •                                                                                                                   |                                    | nage                                                                         |                                                          |
| Carry out work of sanit                                                                                             | arv biumbind/drair                 |                                                                              |                                                          |
| <ul> <li>Carry out work of sanit</li> <li>Connection to Sewer</li> </ul>                                            | ary plumbing/drair                 |                                                                              |                                                          |
| <ul><li>Connection to Sewer</li><li>Sewer Disconnection</li></ul>                                                   |                                    |                                                                              |                                                          |
| <ul> <li>Connection to Sewer</li> <li>Sewer Disconnection</li> <li>Carry o<u>ut Trade Waster</u></li> </ul>         |                                    |                                                                              |                                                          |
| <ul><li>Connection to Sewer</li><li>Sewer Disconnection</li></ul>                                                   |                                    |                                                                              |                                                          |
| <ul> <li>Connection to Sewer</li> <li>Sewer Disconnection</li> <li>Carry o<u>ut Trade Waster</u></li> </ul>         |                                    |                                                                              |                                                          |
| <ul> <li>Connection to Sewer</li> <li>Sewer Disconnection</li> <li>Carry out Trade Waster</li> <li>Other</li> </ul> | e Drainage                         |                                                                              |                                                          |
| <ul> <li>Connection to Sewer</li> <li>Sewer Disconnection</li> <li>Carry o<u>ut Trade Waster</u></li> </ul>         | OMPLY WITH                         | AS/NZS3500 ALTERNA                                                           |                                                          |
| Connection to Sewer Sewer Disconnection Carry o <u>ut Trade Waste</u> Other DRAINAGE WORK TO CO                     | OMPLY WITH                         | AS/NZS3500 ALTERNA AGE/WATER SERVICE INSPECTION                              | N FEE                                                    |
| Connection to Sewer Sewer Disconnection Carry out Trade Waste Other DRAINAGE WORK TO CO                             | e Drainage<br>OMPLY WITH<br>SEWERA | AS/NZS3500 ALTERNA AGE/WATER SERVICE INSPECTION Date of Commencement of Work | N FEE<br>Estimated Date of Completion                    |
| Connection to Sewer Sewer Disconnection Carry out Trade Waste Other DRAINAGE WORK TO CO Date Fee Paid               | e Drainage<br>OMPLY WITH<br>SEWERA | AS/NZS3500 ALTERNA AGE/WATER SERVICE INSPECTION Date of Commencement of Work | N FEE       Estimated Date of Completion       DD     MM |
| Connection to Sewer Sewer Disconnection Carry out Trade Waste Other DRAINAGE WORK TO CO                             | e Drainage<br>OMPLY WITH<br>SEWERA | AS/NZS3500 ALTERNA AGE/WATER SERVICE INSPECTION Date of Commencement of Work | N FEE<br>Estimated Date of Completion                    |

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.



## Licensee's Copy

Serial No A 000001

## **CERTIFICATE OF COMPLIANCE**

for Plumbing and Drainage Work

Please supply requested information correct and neatly

|                                                                                                                                                                                                                                                                                      | PROPERTY & OWNER DETAILS                                                                                                                                                          |                                                              |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|
| House No. Street                                                                                                                                                                                                                                                                     | Suburb                                                                                                                                                                            | Postcode<br>Municipality/Shire                               |
| Owner's Name                                                                                                                                                                                                                                                                         | Full Address                                                                                                                                                                      |                                                              |
|                                                                                                                                                                                                                                                                                      | LICENSEE'S DETAILS                                                                                                                                                                |                                                              |
| Full Name Phone No.                                                                                                                                                                                                                                                                  | Address for Notices Qualified Supervisor No. Licence No.                                                                                                                          | Expiry Date<br>Expiry Date<br>Expiry Date                    |
|                                                                                                                                                                                                                                                                                      | WORK OF WATER SUPPLY                                                                                                                                                              |                                                              |
| Give full Description of Work carried<br>Install Water Supply<br>Install Irrigation system<br>On-site Alternative Water Servic<br>Install/Commission/Maintenance<br>Connection to water supply<br>Install, alter, disconnect or remo<br>Other                                        | es<br>e of Thermostatic Mixing Valve                                                                                                                                              |                                                              |
| PLUMBING WORK TO COMPLY V                                                                                                                                                                                                                                                            |                                                                                                                                                                                   | VE SOLUTION COMBINED                                         |
| Give full description of work carried<br>Carry out work of sanitary plumb<br>Connection to Sewer<br>Sewer Disconnection<br>Carry out Trade Waste Drainage<br>Other                                                                                                                   | ping/drainage                                                                                                                                                                     |                                                              |
| DRAINAGE WORK TO COMPLY V                                                                                                                                                                                                                                                            |                                                                                                                                                                                   |                                                              |
| S<br>Date Fee Paid<br>Amount<br>\$                                                                                                                                                                                                                                                   | DD MM YYYY                                                                                                                                                                        | EE<br>Estimated Date of Completion                           |
| <ul> <li>i. The work corresponds to the specific term</li> <li>ii. The completed work has been to the specific term</li> <li>iii. Where required by Section 11 of pre-existing defective plumbing a tiv. The work complies with the relevence of the work was completed on</li></ul> | ested as required by the Regulator and has passed s<br>the Plumbing and Drainage Act 2011, I have given v<br>and/or drainage work<br>vant Acts, Regulations, Codes and Standards; | uch test;<br>written notice of any identified<br>Yes D N/A D |

<sup>2.</sup> If any detect 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.



Owner's Copy

Serial No A 000001

## CERTIFICATE OF COMPLIANCE

for Plumbing and Drainage Work

Please supply requested information correct and neatly

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 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                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| Full Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| Full Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Address for Notices                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| Phone No.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Qualified Supervisor No. Expiry Date                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Licence No. Expiry Date                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | DD MM YYYY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | WORK OF WATER SUPPLY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| Give full Description of Work carried out                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| □ Install Water Supply                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| □ Install Irrigation system                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| On-site Alternative Water Services                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| □ Install/Commission/Maintenance of T                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      | hermostatic Mixing Valve                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| Connection to water supply                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| □ Install, alter, disconnect or remove a                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | backflow prevention device                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| □ Other                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| PLUMBING WORK TO COMPLY WITH                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | □ AS/NZS3500 □ ALTERNATIVE SOLUTION □ COMBINED                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | Y PLUMBING/DRAINAGE AND SUPPLY DRAINAGE PLAN                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| WORK OF SANITAR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | T PLUMBING/DRAINAGE AND SUPPLY DRAINAGE PLAN                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| Give full description of work carried out                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| Give full description of work carried out  Carry out work of sanitary plumbing/d                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| Give full description of work carried out  Carry out work of sanitary plumbing/d  Connection to Sewer                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| Give full description of work carried out  Carry out work of sanitary plumbing/d  Connection to Sewer  Sewer Disconnection                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| Give full description of work carried out Carry out work of sanitary plumbing/d Connection to Sewer Sewer Disconnection Carry out Trade Waste Drainage                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| Give full description of work carried out  Carry out work of sanitary plumbing/d  Connection to Sewer  Sewer Disconnection                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| Give full description of work carried out Carry out work of sanitary plumbing/d Connection to Sewer Sewer Disconnection Carry out Trade Waste Drainage                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| Give full description of work carried out Carry out work of sanitary plumbing/d Connection to Sewer Sewer Disconnection Carry out Trade Waste Drainage                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| Give full description of work carried out Carry out work of sanitary plumbing/d Connection to Sewer Sewer Disconnection Carry out Trade Waste Drainage                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| Give full description of work carried out Carry out work of sanitary plumbing/d Connection to Sewer Sewer Disconnection Carry out Trade Waste Drainage Other DRAINAGE WORK TO COMPLY WITH                                                                                                                                                                                                                                                                                                                                                                                                                  | Irainage         AS/NZS3500         ALTERNATIVE SOLUTION         COMBINED                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| Give full description of work carried out Carry out work of sanitary plumbing/d Connection to Sewer Sewer Disconnection Carry out Trade Waste Drainage Other DRAINAGE WORK TO COMPLY WITH SEWE                                                                                                                                                                                                                                                                                                                                                                                                             | Irainage         Irainage |
| Give full description of work carried out Carry out work of sanitary plumbing/d Connection to Sewer Sewer Disconnection Carry out Trade Waste Drainage Other DRAINAGE WORK TO COMPLY WITH SEWE Date Fee Paid                                                                                                                                                                                                                                                                                                                                                                                               | Irainage         Irainage         Image                                                                                |
| Give full description of work carried out Carry out work of sanitary plumbing/d Connection to Sewer Sewer Disconnection Carry out Trade Waste Drainage Other Cother DRAINAGE WORK TO COMPLY WITH SEWE Date Fee Paid DOM                                                                                                                                                                                                                                                                                                                                                                                    | Irainage     AS/NZS3500     ALTERNATIVE SOLUTION     COMBINED     RAGE/WATER SERVICE INSPECTION FEE     Date of Commencement of Work   Estimated Date of Completion                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| Give full description of work carried out Carry out work of sanitary plumbing/d Connection to Sewer Sewer Disconnection Carry out Trade Waste Drainage Other Other DRAINAGE WORK TO COMPLY WITH SEWE Date Fee Paid Amount                                                                                                                                                                                                                                                                                                                                                                                  | Irainage         Irainage         Image                                                                                |
| Give full description of work carried out Carry out work of sanitary plumbing/d Connection to Sewer Sewer Disconnection Carry out Trade Waste Drainage Other DRAINAGE WORK TO COMPLY WITH SEWE Date Fee Paid D                                                                                                                                                                                                                                                                                                                                                                                             | Irainage     AS/NZS3500     ALTERNATIVE SOLUTION     COMBINED     RAGE/WATER SERVICE INSPECTION FEE     Date of Commencement of Work   Estimated Date of Completion                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| Give full description of work carried out Carry out work of sanitary plumbing/d Connection to Sewer Sewer Disconnection Carry out Trade Waste Drainage Other Other DRAINAGE WORK TO COMPLY WITH SEWE Date Fee Paid Amount \$ 1. In respect of authorised work carried out                                                                                                                                                                                                                                                                                                                                  | Irainage     AS/NZS3500     ALTERNATIVE SOLUTION     COMBINED     RAGE/WATER SERVICE INSPECTION FEE     Date of Commencement of Work     Estimated Date of Completion     Reference No:     Contractors Signature      by me at the above mentioned property I certify that:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
| Give full description of work carried out Carry out work of sanitary plumbing/d Connection to Sewer Sewer Disconnection Carry out Trade Waste Drainage Other Other DRAINAGE WORK TO COMPLY WITH SEWE Date Fee Paid Carry of authorised work carried out i. The work corresponds to the specification | Irainage         As/NZS3500         As/NZS3500         Atternative Solution         Combined         Example         Date of Commencement of Work         Estimated Date of Completion         Contractors Signature         Contractors Signature         by me at the above mentioned property I certify that:         ations in the notice of work.                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| Give full description of work carried out Carry out work of sanitary plumbing/d Connection to Sewer Sewer Disconnection Carry out Trade Waste Drainage Other Other DRAINAGE WORK TO COMPLY WITH SEWE Date Fee Paid Amount \$ 1. In respect of authorised work carried out i. The work corresponds to the specifica ii. The completed work has been tested                                                                                                                                                                                                                                                  | Irainage         As/NZS3500       ALTERNATIVE SOLUTION         COMBINED         RAGE/WATER SERVICE INSPECTION FEE         Date of Commencement of Work       Estimated Date of Completion         Reference No:       Contractors Signature         by me at the above mentioned property I certify that:         ations in the notice of work.         as required by the Regulator and has passed such test;                                                                                                                                                                                                                                                                                                                                                                                                         |
| Give full description of work carried out Carry out work of sanitary plumbing/d Connection to Sewer Sewer Disconnection Carry out Trade Waste Drainage Other Other Carry out Trade Waste Drainage Other SEWE Date Fee Paid Date Fee Paid The spect of authorised work carried out i. The work corresponds to the specifica ii. The completed work has been tested iii. Where required by Section 11 of the F                                                                                                                                                                                               | Irainage         AS/NZS3500       ALTERNATIVE SOLUTION         COMBINED         RAGE/WATER SERVICE INSPECTION FEE         Date of Commencement of Work         Estimated Date of Completion         Contractors Signature         by me at the above mentioned property I certify that:         ations in the notice of work.         as required by the Regulator and has passed such test;         Plumbing and Drainage Act 2011, I have given written notice of any identified                                                                                                                                                                                                                                                                                                                                     |
| Give full description of work carried out Carry out work of sanitary plumbing/d Connection to Sewer Sewer Disconnection Carry out Trade Waste Drainage Other Other DRAINAGE WORK TO COMPLY WITH SEWE Date Fee Paid Date Fee Paid Date Fee Paid In respect of authorised work carried out i. The work corresponds to the specifica ii. The completed work has been tested iii. Where required by Section 11 of the F                                                                                                                                                                                        | Irainage         As/Nzs3500       ALTERNATIVE SOLUTION         COMBINED         RAGE/WATER SERVICE INSPECTION FEE         Date of Commencement of Work         Estimated Date of Completion         Contractors Signature         by me at the above mentioned property I certify that:         as required by the Regulator and has passed such test;         Plumbing and Drainage Act 2011, I have given written notice of any identified         r drainage work.                                                                                                                                                                                                                                                                                                                                                  |
| Give full description of work carried out Carry out work of sanitary plumbing/d Connection to Sewer Sewer Disconnection Carry out Trade Waste Drainage Other Other Carry out Trade Waste Drainage Other SEWE Date Fee Paid Amount S 1. In respect of authorised work carried out i. The work corresponds to the specifica ii. The completed work has been tested iii. Where required by Section 11 of the F pre-existing defective plumbing and/o                                                                                                                                                          | Irainage         As/NzS3500       ALTERNATIVE SOLUTION         COMBINED         RAGE/WATER SERVICE INSPECTION FEE         Date of Commencement of Work         Estimated Date of Completion         Contractors Signature         Contractors Signature         by me at the above mentioned property I certify that:         as required by the Regulator and has passed such test;         Plumbing and Drainage Act 2011, I have given written notice of any identified         r drainage work                                                                                                                                                                                                                                                                                                                     |

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 Regulation.