

Balonne Shire Council

118 Victoria Street, St George
PO Box 201,
St George QLD 4487



Telephone 07 4620 8888 Facsimile 07 4620 8889
Email council@balonne.qld.gov.au
Website www.balonne.qld.gov.au

Local Government
Act 1993

Local Law No. 15
(Domestic Water
Carriers)

Water Cartage

Application for a Domestic Water Carrier Permit

Contact Council if you have any specific enquiries regarding fees or how to complete this form. Type or print clearly and select boxes where applicable. Enter "n/a" if the question does not apply.

Application is for

Water Carrier Permit Fee _____

Applicant/s details

Title Mr Mrs Ms Miss Other (specify)

Family name

Given names

Position

I declare the information provided in this application to be true and correct.

Signature _____ Date / /

Title Mr Mrs Ms Miss Other (specify)

Family name

Given names

Position

I declare the information provided in this application to be true and correct.

Signature _____ Date / /

Contact details

Select as applicable.

Business Private

Contact person

Postal address

Locality / Suburb

State

Postcode

Contact ph.

Mobile

Contact fax

Email _____

Business details		
Business name must be registered with the Office of Fair Trading. If applicant is a company, insert company name and ACN / ARBN.	Business name BN <input type="text"/><input type="text"/><input type="text"/><input type="text"/><input type="text"/><input type="text"/><input type="text"/><input type="text"/><input type="text"/><input type="text"/><input type="text"/>	
	Company name ACN / ARBN <input type="text"/><input type="text"/><input type="text"/><input type="text"/><input type="text"/><input type="text"/><input type="text"/><input type="text"/><input type="text"/><input type="text"/>	
	Street address	
	Locality / Suburb State <input type="text"/><input type="text"/><input type="text"/> Postcode <input type="text"/><input type="text"/><input type="text"/><input type="text"/>	
Enter postal address if different from street address.	Postal address	
	Locality / Suburb State <input type="text"/><input type="text"/><input type="text"/> Postcode <input type="text"/><input type="text"/><input type="text"/><input type="text"/>	
	Contact ph. <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Mobile <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
	Contact fax <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> Email <input type="text"/>	
Real property description – refer to Rates Notice.	Lot no. <input type="text"/>	
	Reg. plan no. <input type="text"/>	
	Parish <input type="text"/>	
Vehicle details		
Address where tanker is normally housed.	Tanker 1	
	Street address	
	Locality / Suburb State <input type="text"/><input type="text"/><input type="text"/> Postcode <input type="text"/><input type="text"/><input type="text"/><input type="text"/>	
	Registration no. including trailer	
	Model (make / year)	
	Capacity of tank	
	Tank construction material	
Please provide details of the equipment, including delivery pump, fitted to the water tank.	Internal lining	
	Is a backflow prevention device fitted? Yes <input type="checkbox"/> No <input type="checkbox"/>	
	Details of equipment	
	Tanker 2	
Address where tanker is normally housed.	Street address	
	Locality / Suburb State <input type="text"/><input type="text"/><input type="text"/> Postcode <input type="text"/><input type="text"/><input type="text"/><input type="text"/>	
	Registration no. including trailer	
	Model (make / year)	
	Capacity of tank	
	Tank construction material	
	Internal lining	
Please provide details of the equipment, including delivery pump, fitted to the water tank.	Is a backflow prevention device fitted? Yes <input type="checkbox"/> No <input type="checkbox"/>	
	Details of equipment	
	Source and location/s where water is obtained	
	<input type="text"/>	
Provide details of all other uses for which the water tanker is used other than for domestic purposes (e.g. stock water delivery, roadworks).	Other tanker uses	
	<input type="text"/>	
	<input type="text"/>	

Lodgement

Provide a completed application form, supporting documentation (if required) and appropriate fee to Council – see address at the beginning of the form.

Please note: This application and fee MUST be lodged with your Council.

Office use only

Application fee		Reg. no.	
Receipt code		ID no.	
Authorised officer		Inspection date	
Recommendation			
			Rec. no.
Date	□□ / □□ / □□□□		