

# Mount Isa City Council

23 West Street, Mount Isa  
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Mount Isa QLD 4825

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Local Government  
Act 1993

Water Act 2000

## Sprinkler Operation

**Application for a Licence to Operate Sprinkler Outside Permitted Times**  
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

Sprinkler Operation Licence Fee \_\_\_\_\_

### Applicant/s details

Title Mr  Mrs  Ms  Miss  Other (specify)

Family name

Given names

Position

Title Mr  Mrs  Ms  Miss  Other (specify)

Family name

Given names

Position

I / We hereby make application to use a spray, sprinkler, soaker or other device in respect of the land described and:

- Undertake to comply with the conditions set out by Council.
- Acknowledge Council reserves the right to revoke any approval granted to sprinkle where it is deemed by Council that wasting of water is occurring, or for any other reason whatsoever (such as droughts, strikes, break-downs etc).
- Request a meter to be installed subject to the availability of Council funds, if no meter currently exists.

Signature \_\_\_\_\_ Date  /  /

Signature \_\_\_\_\_ Date  /  /

Select as applicable.

### Contact details

Business  Private

Contact person

Postal address

Locality / Suburb

State

Postcode

Contact ph.

Mobile

Contact fax

Email \_\_\_\_\_

### Sprinkler details

Location of sprinkler/s.

Street address

Locality / Suburb

State

Postcode

|   |   |               |  |                             |  |                             |                             |
|---|---|---------------|--|-----------------------------|--|-----------------------------|-----------------------------|
| <b>Enter postal address if different from street address.</b> | Postal address  |               |  |                             |  |                             |                             |
|   | Locality / Suburb   |               | State <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |                             | Postcode <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |                             |                             |
| <b>Real property description – refer to Rates Notice.</b>     | Lot no.   | Reg. plan no. |  | Parish                      |  |                             |                             |
|   | Area of allotment   |               |  |                             |  | (m <sup>2</sup> / ha.)      |                             |
| <b>If insufficient space attach a separate sheet.</b>         | Is there a meter already installed? <input type="checkbox"/> No <input type="checkbox"/> Yes                            |               |  |                             |  |                             |                             |
|   | Reason for requesting licence   |               |  |                             |  |                             |                             |
|   | Description of sprinkling equipment to be used including size of pipes, hoses, number, type and size of sprinklers etc. |               |  |                             |  |                             |                             |
|   | Proposed no. hours per week required for sprinkling   |               |  |                             |  |                             |                             |
|   | Proposed days of the week   |               |  |                             |  |                             |                             |
|   | Preferred sprinkling times  |               |  |                             |  |                             |                             |
|   | From  |               | <input type="checkbox"/> am  | <input type="checkbox"/> pm | To   | <input type="checkbox"/> am | <input type="checkbox"/> pm |
|   | And / or  |               | <input type="checkbox"/> am  | <input type="checkbox"/> pm | To   | <input type="checkbox"/> am | <input type="checkbox"/> pm |

### Lodgement

Please attach the following:

1. Full details of design and specifications for any works that may need to be done.
2. Description of sprinkling equipment to be used (if applicable) including size of pipes, hoses, number, type and size of sprinklers etc.

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

### Office use only

Sprinkling is approved on the property within the days and times indicated.

| Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday |
|--------|---------|-----------|----------|--------|----------|--------|
|        |         |           |          |        |          |        |

Signature of officer

Name of officer

Expiry date  /  /

Date of issue  /  /

Receipt no.