



Job No.: _____

Block(s): _____ Section: _____ Suburb: _____

**Minimum requirements to lodge an Application for Non-Domestic Discharge to Sewer
(TWF Compliance Checklist)**

| Item | Description | OK | Not OK | N/A |
|------|--|--------------------------|--------------------------|--------------------------|
| 1 | Double sided A3 sheet (format as per original trade waste form) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2 | Trading Name (i.e. Senior Living / Bellerive) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3 | Development location – check for ACTMapi for accuracy | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4 | Block and Section numbers are in the correct location on the page | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5 | Development type (i.e. shopping mall, multi unit, warehouse, commercial, mixed use commercial / residential, town houses, etc) and trading name required | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6 | Development name (also state if unknown) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7 | Drainage plan number (if available) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8 | Prevention and servicing measures and arrangements | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9 | Environmental management systems and waste minimisation details | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10 | Waste enclosure details | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11 | List all undercroft car parking | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12 | Air conditioning system and cooling tower(s) details (including type and discharge) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 13 | GIT details and restaurant seating and discharge details (including type of food to be served) – Send copy of menu if available | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 14 | Clay / plaster arrestor details | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 15 | On-site stormwater re-use details including type (also state if unknown) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |



| Item | Description | OK | Not OK | N/A |
|------|--|--------------------------|--------------------------|--------------------------|
| 16 | Pumped discharge details – including the following information: <ul style="list-style-type: none">• Capacity of pump station• Capacity to pump on• Retained volume at pump off• Rising main size• Rising main velocity• Total length of rising main• Retained volume in rising main at pump off Total retained volume (rising main and pump station) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 17 | Pool discharge details (Consult Acceptance Guideline 7 for more information)) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 18 | For aged car facilities – specify if the development is for separate residencies or nursing home or if the development will have medical facilities on site. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 19 | Extraordinary / Unusual pre-treatment details (refer section 127 of the <i>Utilities Act 2000</i>) (e.g. aircraft hangars, black water treatment, etc) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 20 | Discharge details (including pH, concentration, volume discharged daily, maximum temperature and dangerous goods class) as applicable | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 21 | Compliance with Icon's <i>Trade Waste Notes</i> (consult <i>Acceptance Guidelines</i> to ensure what is being put on the form is correct) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 22 | As much information as available is nominated on the trade waste form | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 23 | Property owner's details (including ACN/ABN) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 24 | Property owner's representative's (original) signature (letter of authorisation if a representative is signing on owner's behalf required) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 25 | The drawings for complex installations have been sent to Icon Water Trade Waste Department | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 26 | Scan of pdf drawings clearly identifying GIT locations, GIT numbers and Tenancy number have been issued to ICON Water Trade Waste Department for their records. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |



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|----|---|--------------------------|--------------------------|--------------------------|
| 27 | All coalescing plate chambers and neutralising chambers details are included | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 28 | Submit initial GIT identification form as part of base building trade waste submission. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Name _____ Signature: _____ Date: _____

Comments _____

