

**Failure to give Notification may incur a penalty**

Development Application Number:	
Address of Installation:	
Property Owner:	
Contact Name (person giving this Notice):	
Contact Number (person giving this Notice):	
Installing Plumber's Name:	
Installing Plumbers Contact Number:	

**Notice must arrive at least ONE (1) Business day prior to work commencing  
(Excludes Saturdays, Sundays and Public Holidays)**

In accordance with the Development Approval; it is proposed to undertake the following building work:

Stage of Works	Date	Time
Installation of Waste Control System		
Under Floor Plumbing		
Final Connections (Including irrigation system)		
Decommissioning (Including irrigation system)		

**Notice may be given direct via the following options:**

Email: [city@mountgambier.sa.gov.au](mailto:city@mountgambier.sa.gov.au)

Phone: (08) 87212 530

Fax: (08) 8724 9791

OFFICE USE ONLY			
Notification Received:	Date: / /	Time: am / pm	Signature:
Inspected:	YES / NO	Date: / /	Inspector:
<input type="checkbox"/> As per submitted plans		<input type="checkbox"/> Other: _____	
<input type="checkbox"/> Photo on File			