

## Plan Assessment for Trade Waste Installation Form

ABN: 89 791 717 472	1300 086 489	unitywater.com		m	
Applicant details:					
Applicant name:					
Postal address:					
Daytime contact nu	mber:		Contact Person:		
Business details:					
Business property a	address:				
Real property descri	iption: Lot:		Plan: SP/RP		
Proposed method of Trade Waste pre-treatment:					
Name and contact details of the design professional who has designed/assessed the proposed trade waste installation:					
Other details (if applicable):					
Proposed business to or Unknown proposed b	_				
	,, _	<del></del>			
Applicant statemen	t:				
All fixtures, fittings, the conditions of Ur	ventilation and nitywater's Trac	pre-treatment devi le Waste Manageme		d Drainage Act 2018 and AS: 3500. Ulated and designed to comply with	
Signature:			Date	Date:	
Return this form with payment details to:					
POST Unitywater PO Box 953 Caboolture QLD 457	tradewa	card payments only. aste@unitywater.con	6-10 Maud Stre	4.30pm Monday to Friday) et, Maroochydore Qld 4558 nzac Avenue, Mango Hill Qld 4509	
OFFICE USE ONLY CSO:					
Amount:		Receipt number:	Dat	e:	

F9831 Revision: 15 Last Review Date: 01/07/2024 Next Review Date: 30/06/2025 Page 1 | 2



## Plan Assessment for Trade Waste Installation Form

🕠 <u>unitywater.com</u> 🦪 <u>tradewaste@unitywater.com</u> 🔁 PO Box 953, Caboolture QLD 4510 **(300 086 489)** How to pay (Cash not accepted) In Person Please present in person at a Customer Service Centre: 8:30am to 4:30pm, Monday to Friday. Level 2, 1737 Anzac Avenue Mango Hill: Maroochydore: Ground Floor, 6-10 Maud Street Please make cheque/money orders payable to Unitywater and mail to: PO Box 953, Caboolture QLD 4510 Credit Card Please complete your details below to make a credit card payment by Visa or MasterCard. To ensure the security of your credit card, please do not provide your credit card number or any other card details on this form\* Instead, a member of our Unitywater team will call you as soon as possible after receiving this form to ask for your credit card number and process your payment over the phone. Please provide your preferred business hours phone number below so we can call you, and, send this completed form to: • email: tradewaste@unitywater.com • or post: PO Box 953, Caboolture QLD 4510 APPLICATION DETAILS: (PLEASE COMPLETE ALL SECTIONS BELOW) Contact name: Business hours contact number: Email address: Card holders name: Cardholder signature: Amount payable: \$ 106.00 Date: Receipt name:

## \* This also helps ensure compliance with the Payment Card Industry Data Security Standard

## **Privacy Statement**

Receipt address:

Unitywater is collecting your personal information for the purpose of providing the requested search. The collection of this information is authorised under the *South East Queensland Water (Distribution and Retail Structuring) Act 2009.* Your information will not be given to any other person or agency unless required by law or we have your permission in writing.

F9831 Revision: 15 Last Review Date: 01/07/2024 Next Review Date: 30/06/2025 Page 2 | 2