



**Postal Address**  
PO Box 953  
Caboolture QLD 4510

**Unitywater**  
Ph.: 1300 0 UNITY (1300 086 489)

**Internet**  
[www.unitywater.com](http://www.unitywater.com)

**Email**  
[development.services@unitywater.com](mailto:development.services@unitywater.com)

**Note:** THE ACCEPTANCE OF THIS FORM IS SUBJECT TO THE APPLICANT MEETING THE OTHER AND STAGED CONNECTION CRITERIA IN [UNITYWATER'S CONNECTION POLICY](#).

**Application details:**

This application form is used for connections (Other than standard) including Network Works.

You must:

- complete all necessary sections within this form (*Application details*),
- make 'Other' & 'Staged' connection applications in accordance with [Connections Administration Manual](#) (CAM) Sections 4.6, 4.7 and 4.8,
- provide any supporting information identified on the forms as being required to accompany your application,
- ensure that Owners Consent is supplied at the time of making this application, failure to provide Owners Consent will deem this application to be Not Properly Made and will be rejected,
- attach extra pages if there is insufficient space on this form.

**Note:** Application for **Other & Staged Application (not for standard connection)** requires the appropriate fees to be paid at time of application. The fees for this form shall be in accordance with [Unitywater's fees and charges](#).

Where an Other & Staged Application (not for standard connection) includes building over or near water supply or sewerage infrastructure a form for this application can be down loaded via [Unitywater's website](#). The fee for this form shall be in accordance with [Unitywater's fees and charges](#)

All terms used on this form have the meaning given to them in [Unitywater's Connection Policy](#)

**Applicant details:** (Note: the applicant is the person responsible for making the application and need not be the owner of the land. The applicant is responsible for payment of fees and ensuring the information provided on the application form is correct. Any connection approval that may be issued as a consequence of this application will be issued to the applicant).

Name (individual or company name in full): \_\_\_\_\_

For companies, contact name: \_\_\_\_\_

Postal address: \_\_\_\_\_

Daytime contact number: \_\_\_\_\_

Mobile number: \_\_\_\_\_

Email: \_\_\_\_\_

Applicant's reference number: \_\_\_\_\_

If an Infrastructure Charges Notice is generated, please advise who this should be addressed / issued to:

Name (individual or company name in full): \_\_\_\_\_

Address Details: \_\_\_\_\_

**1. Location of the land** (Identify each lot affected by the application in a separate row)

**Table A - Street address/s and lot on plan for the land** (Attach a separate schedule if there is insufficient space in this table)

Street address				Lot on plan description		Local government area (e.g. Moreton Bay, Sunshine Coast or Noosa)
Unit no.	Street no.	Street name and official suburb, locality name	Postcode	Lot no.	Plan type and plan no.	

**2. Does this application propose infrastructure in DTMR road reserve?** Yes  No

**Note:** Applications that trigger a referral to DTMR will result in an additional assessment time frame.

**3. What is the nature of the connection and what type of approval is being sought?**

Connection Applications: – (Planning Aspect)		Unitywater Fees and Charges		
Application Type	Unit	Qty (Per Unit)	Fee \$ (Incl GST)	Total \$
Basic – (Assessment & Decision)	Application			
Moderate – (Assessment & Decision)	Application			
Complex – (Assessment & Decision)	Application			
Network Works Applications:				
Basic – (Assessment & Decision)	Application			
Moderate – (Assessment & Decision)	Stage			
Complex – (Assessment & Decision)	Stage			
Other Development Services:				
Technical Report Review <small>(A report fee applies to each aspect submitted e.g. water network analysis, sewer network analysis, odour analysis etc.)</small>	Report			
Sewage pump station assessment	Application			
Fast Track	Application			
<b>Application Total \$</b>				

**4. Brief Description of Development:**

**Reconfiguring of a lot** (including description of the land designation in accordance with the relevant Council Planning Scheme).

Total Number of Lots: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Change in use on site** (Include description of use in accordance with the relevant Council Planning Scheme).

For residential development provide plans including floor plans with identification of all bedrooms and type, location and dimension of all buildings.

For non-residential development (e.g. commercial, industrial etc) provide plans including floor plan, type, location and dimension of all buildings.

Total Non-Residential Gross Floor Area (GFA): *if applicable*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Is this a multi staged development?      No       Yes       -      If Yes complete below:

Stage Description:	Details: (e.g. Number of Lots, Number of Dwellings, GFA)

The applications above may result from a Council Development Permit that contains Unitywater conditions. Note that this does not include a condition that requests a Unitywater Certificate of Completion for water supply and/or sewerage.

Do you have a Council Development Permit containing a Unitywater condition(s)?

No  Yes - if Yes please provide number: \_\_\_\_\_

Alternatively, where the full development application/approval documents are available on PD Online, you may provide the development application number. \_\_\_\_\_

Are there any current approvals (e.g. previous Unitywater Connection Approval e.g. 201500xxxx or Council development permit e.g. MCU / RAL / OPW) associated with this application?

No  
 Yes (provide details below and attach copies of the current Unitywater Connection Approval and Council's decision notice where applicable)

Unitywater Service Advice Notice Number (if applicable): \_\_\_\_\_

**Table B – List previous Unitywater and Council Approvals associated with this Development Site**

List of approval reference/s	Date approved (dd/mm/yy)	Date approval lapses (dd/mm/yy)

**Important information for applicant/s making this application as a condition of a Council Development Permit:**

- Development Permits are issued by the relevant Council;
- The applicant must submit a plan showing the proposed connection details, e.g. hydraulic servicing plan with the location of the proposed meter/s or a civil engineering drawing for a road crossing service;
- If the proposed meter/s is to be installed on a recently constructed water main, the meter/s will be installed after the water main has been accepted 'On – Maintenance'. The timing of this is dependent upon the Developer.

**Applications:**

**Connection Category**

<input type="checkbox"/> Other	All approvals will be dealt with by one (1) Decision Notice, i.e. no prior approvals have been obtained (includes Council Development Permit with Unitywater conditions. and no further Network Works approval is required.
<input type="checkbox"/> Staged	Multiple approvals may be required to establish a connection for the development. e.g. design approval for Network Works, approval to satisfy an application to Council for plumbing compliance, approval for lodgement of a Private Works quotation request.

**5. Connection Aspect and Type**

**Connection Aspect:** (Select all that apply)

- New Connection  Disconnection  Alteration to a Connection (e.g. relocate meter)  
 **High Risk Activity - Non Domestic** (Please Refer to list of High Risk activities in Tables G & H before selection)

**Network Works Type:** (Select all that apply)

- Extension of Unitywater Network (e.g. External Network Works for development, new mains for subdivision)  
 Network Works Approval (e.g. Relocate main or lower / raise main alignment)  
 Decommissioning of part of Unitywater Network (e.g. Abandon a section of main, decommission SPS)

**6. Current lawful use/s of the land (e.g. vacant land, house, apartment building, etc.)**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**7. Owner's Consent of Land to be Connected**

**Note:** - Failure to provide Owners Consent will deem this application to be Not Properly Made and will not be processed. Complete either Table C or Table D as applicable.

**Table C**

Name/s of owner/s of the land to be connected: \_\_\_\_\_  
I/We, the above-mentioned owner/s of the land, consent to the making of this application.  
Signature of owner/s of the land to be connected: \_\_\_\_\_  
Date: \_\_\_\_\_

**Table D**

Name/s of owner/s of the land to be connected: \_\_\_\_\_  
 The owner's written consent is attached. **Note:** To avoid delay in assessment of this application, Owners Consent **must** be completed at the time of submission.

**8. Owner's Consent of any Related Land**

No other land will be accessed to provide connection – Go to Question 7  
 Yes, other land will need to be accessed to provide connection – Complete Table E

**Table E**

Name/s of owner/s of related land: \_\_\_\_\_  
Street address: \_\_\_\_\_  
(Attach a separate schedule if there is insufficient space in this table). \_\_\_\_\_  
I/We, the above-mentioned owner/s of the land, consent to the making of this application.  
Signature/s of owner/s of the land: \_\_\_\_\_  
Alternatively, if the written consent of the owner/s is to be provided separately, tick the box below.  
 The written consent of the related land owner/s is attached. **Note:** To avoid delay in assessment of this application, Land Owners Consent **must** be attached at the time of submission.  
Date: \_\_\_\_\_

**9. Are there any existing easements on the land, including related land? (e.g. access, electricity, stormwater, water, sewerage etc.)**

No  Yes - Attach drawings or records showing the type, location and dimension of each easement.

**10. List below all of the forms and supporting information that accompany this application (Include networks analysis, design plans, etc.), including information as required under Section 4, of Unitywater's Connections Administration Manual.**

Please ensure your application has all relevant supporting documentation attached. Also, please note your request may not be able to be processed if information is not supplied.

**Table F**

Description of attachment or title of attachment	Method of lodgement to Unitywater

## 11. Applicant's declaration:

By making this application, I declare that all information in this application is true and correct, (**Note: it is unlawful to provide false or misleading information**).

Signature of applicant: \_\_\_\_\_

Date: \_\_\_\_\_

### Terms and Conditions of Application:

**Note:** Connection of an unmetered Unitywater water service to the water supply network is a breach of the *Water Supply (Safety and Reliability) Act 2008*. Unitywater is entitled to recover the cost of disconnection/reconnection and any loss suffered from supplying unmetered water.

An administration charge of \$70.00 (incl. GST) may be levied if a refund is required to be made.

### How to Pay:

Refer to next page

**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.

**Caboolture:** Ground Floor, 33 King Street

**Maroochydore:** Ground Floor, 6-10 Maud Street

**Cheque:**

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 daytime phone number below so we can call you and send this completed form to:

- email: [development.services@unitywater.com](mailto:development.services@unitywater.com)
- or post: **PO Box 953, Caboolture QLD 4510**

**Contact details for the person who will be providing the Credit Card details:**

Contact Person's Name: \_\_\_\_\_

Contact Person's Phone Number: \_\_\_\_\_

Amount Payable: \$ \_\_\_\_\_

Name for Receipt: \_\_\_\_\_

Address for Receipt: \_\_\_\_\_

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

Please note a surcharge to cover the costs associated with credit card transactions could apply. For further information please go to [www.unitywater.com/credit-card-transactions](http://www.unitywater.com/credit-card-transactions)

**Privacy statement**

Unitywater is collecting your personal information for the purpose of providing the requested service. The collection of this information is authorised under the South East Queensland Water (Distribution and Retail Restructuring) 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.

## Table G – High Risk Activities – Individual & Zone Protection as identified within AS/NZS 3500.1:2015 - Appendix G

This table relates to High Risk Activity ratings for **INDIVIDUAL** and **ZONE** backflow prevention protection as defined within Appendix G, tables **G1** & **G2** - AS/NZS 3500.1:2015, Plumbing and Drainage, Part 1 - Water Services.

**INDIVIDUAL PROTECTION** – Devices for backflow prevention protection at individual fixtures, appliances or apparatus,

**ZONE PROTECTION** - Devices for backflow prevention protection at the connection to specified sections of the water supply system within a building or facility.

This section only needs to be completed and submitted if it has been indicated, in – (*Connection Aspects and Type*), that a high risk activity will be undertaken on the premises.

**Note:** If “**High Risk Activity – Non Domestic**” has been selected above, then tables (**G**) and (**H**) must be completed and returned with this application, ensuring that details of proposed activity and potential network demands are included.

**Please Note:** High Risk activities may also require a Trade Waste Application, <http://www.unitywater.com/trade-waste> .

**Place a tick (✓) against any proposed High Risk Activities.**

### AGRICULTURAL & HORTICULTURAL APPLICATIONS

✓	FORM OF CROSS CONNECTION	HAZARD RATING	MODEL REQUIRED
	Antibiotic injectors	High	RBT or RPZD
	Fertilizers, herbicides, nematicides, insecticides and weedicides injected into an irrigator (see Section 7, Type D)	High	RBT or RPZD
	Fogging and cleaning sprays with chemical injection	High	RBT or RPZD

### INDUSTRIAL AND COMMERCIAL

	FORM OF CROSS CONNECTION	HAZARD RATING	MODEL REQUIRED
	Fogging and cleaning spray equipment with chemical injection or additives	High	RBT or RPZD
	Pan washing apparatus	High	RBT or RPZD
	Chemical dispensers (high toxicity)	High	RAG, RBT or RPZD
	Weed and pest spraying and water cartage tanks	High	RAG or RPZD (see Figure 1)
	Mixing of chemicals	High	RAG or RPZD
	Portable and mobile tankers	High	RAG or RPZD (see Figure G1)

### HOSPITALS / MEDICAL

	FORM OF CROSS CONNECTION	HAZARD RATING	MODEL REQUIRED
	Equipment used for handling, mixing, measuring and processing chemical and microbiological substances	High	RAG or RPZD
	(a) Developer mixing facilities	High	RAG or RPZD

### FIXTURES AND APPLIANCES

	FORM OF CROSS CONNECTION	HAZARD RATING	MODEL REQUIRED
	Bidets	High	RBT or RPZD
	Food preparation or food storage tanks, vats and vessels with clean-in-place systems	High	RAG or RPZD

### WATER SUPPLY SYSTEMS PERMANENTLY ATTACHED

	FORM OF CROSS CONNECTION	HAZARD RATING	MODEL REQUIRED
	Cooling towers*	High	RAG or RPZD

**WATER TREATMENT SYSTEMS**

✓ FORM OF CROSS CONNECTION	HAZARD RATING	MODEL REQUIRED
Demineralizing equipment using ion-exchange resins with acid and alkali regeneration	High	RBT or RPZD
Plants with auxiliary non-drinking water supplies	High	RBT or RPZD

**AGRICULTURAL, HORTICULTURAL AND IRRIGATION SYSTEMS**

FORM OF CROSS CONNECTION	HAZARD RATING	MODEL REQUIRED
Irrigation systems injected with fertilizers, herbicides, nematicides and insecticides (see Section 7, Type D)	High	
Drinking nipples and troughs	High	

**FIXTURES AND APPLIANCES**

FORM OF CROSS CONNECTION	HAZARD RATING	MODEL REQUIRED
Sanitary dump points	High	RAG or RPZD
Food storage tanks, vats and vessels with clean-in-place systems	High	RAG or RPZD

**INDUSTRIAL AND COMMERCIAL**

FORM OF CROSS CONNECTION	HAZARD RATING	MODEL REQUIRED
Electroplating, degreasing, descaling, stripping, pickling, dipping, etc., tanks, vats and vessels	High	RBT or RPZD
Commercial laundries	High	RAG or RPZD
Cooling or heating systems with recirculating water	High	RAG or RPZD
Clean-in-place systems (i.e. internal chemical cleaning takes place without dismantling equipment)	High	RAG or RPZD
Dockside facilities	High	RAG or RPZD
Industrial process water that has been recirculated	High	RAG or RPZD
Industrial and teaching laboratories	High	RAG or RPZD

**HOSPITALS/MEDICAL LABORATORIES, NURSING HOMES**

FORM OF CROSS CONNECTION	HAZARD RATING	MODEL REQUIRED
Dissecting rooms in hospitals and medical buildings	High	RBT or RPZD
Mortuary equipment used in funeral parlours, mortuaries, autopsy areas	High	RBT or RPZD
Utility rooms, where other than hand basins are installed	High	RBT or RPZD
Operating theatres in hospitals and medical buildings	High	RBT or RPZD

*Details of activity and potential network demands:*



**Table H – High Risk Activities – Containment Protection as identified within AS/NZS 3500.1:2015 - Appendix G**

**Table H** - Relates to High Hazard ratings for **CONTAINMENT PROTECTION** as defined within Appendix G, table G3 - AS/NZS 3500.1:2015, Plumbing and Drainage, Part 1 - Water Services.

**Containment Protection** – Backflow prevention protection at the **PROPERTY BOUNDARY** to protect the network utilities or mains water supply from contamination.

This section only needs to be completed and submitted if it has been indicated, in – (*Connection Aspects and Type*), that a high risk activity will be undertaken on the premises.

**Note:** If “**High Risk Activity – Non Domestic**” has been selected above, then tables (**G**) and (**H**) must be completed and returned with this application, ensuring that details of proposed activity and potential network demands are included.

✓	TYPE OF PREMISES REQUIRING CONTAINMENT PROTECTION	HAZARD RATING	MODEL REQUIRED
	Premises with an alternative water supply excluding rainwater tanks	High	RBT or RPZD
	Premises where inspection is restricted	High	RBT or RPZD
	Hospitals, mortuaries, clinics and the like	High	RBT or RPZD
	Piers, docks and other waterfront facilities	High	RBT or RPZD
	Sewage treatment plants and sewage lift stations	High	RBT or RPZD
	Chemical plants	High	RBT or RPZD
	Metal finishing plants	High	RBT or RPZD
	Petroleum processing or storage plants	High	RBT or RPZD
	Radioactive material processing plants or nuclear reactors	High	RBT or RPZD
	Car and plant washing facilities	High	RBT or RPZD
	Abattoirs	High	RBT or RPZD
	Factories using processing or manufacturing toxic chemicals	High	RBT or RPZD
	Chemical laboratories	High	RBT or RPZD
	Pathology laboratories	High	RBT or RPZD
	Sanitary depots	High	RBT or RPZD
	Universities	High	RBT or RPZD

**LEGEND:**

RAG = Registered Air Gap

RBT = Registered Break Tank

RPZD = Reduced Pressure Zone Device

*Details of activity and potential network demands:*


By making this application, I declare that all information in this application is true and correct. (**Note:** it is unlawful to provide false or misleading information)

Applicant Name: \_\_\_\_\_

Property Address of Proposed Installation: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_