REGULATION 87 (2)

APPLICATION FOR PERMIT FOR SANITARY PLUMBING OR DRAINAGE WORK (TO BE COMPLETED BY A REGISTERED DRAINLAYER OR PLUMBER ONLY)

TO:

The Engineer, The Hokianga County Council, P.O. Box 3, RAWENE.

I,	the undersigned	Walter T.	Scarell	Full Name
of_	Kawene			HEREBY APPLY

for a permit for the work described herein, and set out in the plans attached hereto, to be carried out in/on the premises situated in:-

Lot Number: 142-145 D.P. Block: or S.D. S.D. M. Donnell St or Street or Road Rawene

NAME AND ADDRESS of person for whom work is to be carried out Henry Munchen

NAME AND ADDRESS of craftsman, plumber or registered drainlayer or other personentitled to do the work.

WI Leavell ______Reg. No: 0191 Fee** Total ESTIMATED VALUE OF : *Labour \$_____ (a) Plumbing : ge: \$____\$___\$ <u>Amonchur</u> the day of August 1984 (b) Drainage : SIGNATURE: 9 Dated this

*The Permit fee is calculated on the value of the Labour content only of the work. Please note that where the labour cost is NOT stated, it will be calculated as 40% of the total cost of Plumbing Work and 60% of the total cost of Drainage Work. **The fee payable is \$5.00 per \$100.00 estimated value of the work (labour only).

FORM 1

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HOKIANGA COUNTY COUNCIL

Information Required to Accompany Application for Permit for				
Sanitary Plumbing or Drainage Work.				
t To and				
Description of Work: <u>connection & Dever</u>				
Soil Type:				
Soakage Test Results (Where Applicable)				
Septic Tank Size: NA				
Water Supply:				

For drainage work a plan of the proposed work is to be drawn to scale on the reverse of this sheet and must show: section boundaries, buildings, drains, fittings, inspection pipes and junctions etc.

signed: WT Scarell.

(Registered Drainlayer or Plumber)