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Return Information: (Form must be returned with payment via cheque, cash or credit Card details)
Fax: 07 4197 4455 **Post: PO Box 1943, Hervey Bay** **In Person: Council Administration Centres**

Application for Evaluator Registration for On Site Sewerage Facilities

Purpose of Form: ***This form will be used to process your request for evaluator registration for onsite sewerage facilities.***

***Denotes a Mandatory field**

I hereby apply for an On Site Sewerage Facilities Evaluator Registration, authorizing me to undertake and compile Site and Soil Assessment Reports and On Site Sewerage Facilities Designs for new and existing domestic and commercial dwellings (<20EP) within the Fraser Coast Regional Council local authority.

Business Name:

Business Address:

Postcode:

Evaluator's Name:

Home Address:

Postcode:

Phone BH: Phone AH:

Mobile: Fax:

E-mail Address:

Q.B.S.A or R.P.E.Q Number:

Details of qualifications and experience in relation to Site and Soil Assessment and On Site Sewerage Facility designs must be submitted with this application. **Note**: The successful completion of a Site/Soil Assessment and Design Course for On Site Sewerage Facilities is a compulsory minimum qualification (site assessment and design course for on site sewerage facilities available through TAFE Queensland presently meets minimum qualification).

I acknowledge and agree that:

1. It is a condition of every registration that:
   - 1.1 All work carried out in relation to the site and soil assessment, design and installation of on site sewerage facilities must be carried out so as to comply with the Plumbing & Drainage Act 2002, all relevant regulations, local laws, codes and standards.
   - 1.2 I must comply with all directions or requisitions given to me by an authorized officer of the Council to justify any work I have carried out with the Fraser Coast Regional Council.
2. If I breach the above conditions or any other conditions imposed on a registration issued to me, the registration may be cancelled.

Evaluator's Signature: Date:

OFFICE USE ONLY

Date Received: Received OK:

Apply to Register: Registration No:

Privacy Notice: In using this form you are providing personal information such as name and contact details**.** This information will be used only for the purpose stated above and will only be accessed by persons who have been authorised to do so. Your personal information is handled in accordance with the *Information Privacy Act 2009*. **More ...**
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