

COMPLETION OF WORKS INSTALLATION CERTIFICATE



On-Site Wastewater and/or Effluent Disposal System (to be issued and signed by the licensed installer)

📍 Civic Centre, 68 Elizabeth Street, Moss Vale NSW 2577 (PO Box 141, Moss Vale NSW 2577)

☎ (02) 4868 0888 ✉ mail@wsc.nsw.gov.au

Installation Details

Issued By:	
To be Supplied to Wingecarribee Shire Council DA Number:	
In Respect of On-Site Wastewater Service for Owner/s:	

Site Details

Lot & DP:	
Property Address:	

Description of Project

Installation of an on-site wastewater system for: (e.g. four bedroom dwelling)	
NSW Health Accredited Treatment System and Model Number:	
Nature of Disposal System / Land Application: (e.g. 400m ² subsurface drip irrigation)	

Installed in Accordance With Conditions of Consent and Wastewater System Report

Report Prepared by:	
Report Date:	
Date of Site Installation Inspection:	

REPORT: Variations: None. Installed as indicated on site plan in system design.

DECLARATION:

I believe on reasonable grounds that all of the wastewater works have been completed in accordance with the Council Consent Number:	
and wastewater system report prepared by:	
Name:	
Title:	
Signature:	

Working with you