

Form 3—Covered work declaration

Version 1 - July / 2019

| | n is to be used for the purposes of sections 66(2) and 67(2) of the Plumbing and PDR). Completion of all applicable sections is mandatory. | | | | | |
|--|---|--|--|--|--|--|
| 1. Description of land The description must identify all land the subject of the application. The lot and plan details (e.g. SP/RP) are shown on title documents or a rates notice. | Street address (include number, street, suburb/locality and postcode) Lot and plan: Shop/tenancy number Storey/level Local government area (if applicable) | | | | | |
| 2. Permit details | Permit number Date permit issued (if known) Note: Subject to section 66(1) of the Plumbing and Drainage Act 2018, a person must not carry out permit work unless the person has a permit for the work and complies with the permit and any conditions of the permit. | | | | | |
| 3. Action notice issued Complete this section if an action notice has been issued under Section 66(2)(a) of the PDR. | Reference number (if applicable) Date notice issued (if applicable) | | | | | |
| 4. Stage of work Identify the stage of the work covered and subject of the inspection request. | 1. Water supply pipes laid under a floor slab or in another area 2. Water supply pipes laid below ground level and external to a building or other structure 3. Water supply pipes installed in a building or other structure 4. Sanitary drainage laid under a floor slab 5. Sanitary drainage laid below ground level and external to a building or other structure 6. Sanitary plumbing installed in a building or other structure 7. Installation of a treatment plant (e.g. septic tank, on-site sewage or greywater treatment plant) 8. Installation of a component of an on-site sewage facility e.g treatment plant or land application area 9. Other Provide a brief description of the work and specific location of work. | | | | | |
| 5. Inspection arrangements | Time and date of the agreed inspection Date: Time: | | | | | |
| | Date the work was covered Date: | | | | | |

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| 6. Responsible person The 'responsible person' is a person who is licensed to perform the work and either | Name (in full) Occupational licence number Contractor licence number (If applicable) | | | | | |
|--|---|--|--|--|--|--|
| performs or supervises the performance of the work. | Phone number Email address Postal address | | | | | |
| | Postcode | | | | | |
| 7. Contractor licence | Full name of company (or individual if not a company) | | | | | |
| If the 'responsible person' is not the contractor for the work, | Contractor licence number | | | | | |
| the contractor's details must be provided here. | | | | | | |
| | Phone number Email address | | | | | |
| | | | | | | |
| 8. Declaration I hereby state that the work has been completed in conformity with the Plumbi and Drainage Regulation 2019, and that the information provided in this form i true and accurate record and that I am the responsible person. | | | | | | |
| | Signature Date | | | | | |
| | | | | | | |
| governments. This information ma application and monitoring complia handles the local government's fin authorities, the Queensland Buildin monitoring compliance with the PD accordance with the Information P | on on this form is collected as required under the <i>Plumbing and Drainage Act 2018</i> (PDA) by local y be stored in the local government database and will be used for purposes related to deciding an ance under the PDA. Your personal information will be disclosed to the financial institution which ancial transactions and may be disclosed to other local government agencies, local government ng and Construction Commission and third parties for purposes relating to administering and DA. Personal information will otherwise only be disclosed to third parties with your consent or in <i>trivacy Act 2009</i> . RTI: The information collected on this form will be retained as required by the r relevant Acts and regulations and is subject to the Right to Information regime established by the | | | | | |

| OFFICE USE ONLY | FEE (\$) | DATE | RECEIVING OFFICER'S NAME/S | REFERENCE NUMBER/S | |
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