

# CONCEALED LEAK REMISSION APPLICATION FORM

Isaac Regional Council is collecting your personal information in order to manage, monitor and improve its service delivery in relation to Water and Wastewater operations. Your personal information will be accessed only by authorised persons in order to process this application. Your information will not be given to any other person or agency unless required by law. Personal information is handled in accordance with the *Information Privacy Act 2009*.

## SECTION 1 - PROPERTY OWNER DETAILS

<b>NAME</b>		
<b>POSTAL ADDRESS</b>		
<b>PHONE</b>		<b>FAX</b>
<b>EMAIL</b>		

## SECTION 2 - PROPERTY DETAILS FOR WHICH CONCEALED LEAK HAS OCCURRED

<b>PROPERTY ADDRESS</b>		
Have you applied for a concealed leak remission at the above property address in the last 3 years?		
	Yes <input type="checkbox"/>	No <input type="checkbox"/>

## SECTION 3 - GROUNDS FOR REQUEST (attach additional page if necessary)

Was a Licensed Plumber engaged to make repair:	Yes <input type="checkbox"/> No <input type="checkbox"/>

## SECTION 4 – APPLICANT DECLARATION

I have read and understood the extent of assistance available under the Council's Concealed Leak Remission Policy, available at [www.isaac.qld.gov.au](http://www.isaac.qld.gov.au)

<b>NAME</b>		
<b>SIGNATURE</b>		<b>DATE</b>

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## SECTION 5 – PLUMBER’S DETAILS

COMPANY NAME	
PLUMBER’S NAME	
PHONE	
BUSINESS ADDRESS	
LICENSE NUMBER	

## SECTION 6 – PLUMBER’S CONCEALED LEAK DESCRIPTION OF WORK (attach additional page if necessary)

LOCATION OF LEAK	
DATE LEAK REPAIRED	
POSSIBLE CAUSE AND SUMMARY OF WORK COMPLETED	

## SECTION 7 - PLUMBER’S DECLARATION

I confirm that the leak was:

- in the main water supply pipe, from the water meter on the property owner’s land
- in a location and/or of a nature which contributed to it not being evident
- repaired in conformity with the *Plumbing and Drainage Act 2002* and the Standard Plumbing and Drainage Regulation 2003

I also confirm that the information in this form is a true and accurate record of the work carried out.

NAME			
SIGNATURE		DATE	

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## SECTION 8 - INFORMATION FOR APPLICANTS

IRC will accept this application once all sections have been completed and submitted to IRC (see checklist below):

<b>SECTION 1</b>	Property Owner Details	<input type="checkbox"/>
<b>SECTION 2</b>	Property Details for which Concealed Leak has occurred	<input type="checkbox"/>
<b>SECTION 3</b>	Grounds for Request	<input type="checkbox"/>
<b>SECTION 4</b>	Applicant Declaration	<input type="checkbox"/>
<b>SECTION 5</b>	Plumber's Details	<input type="checkbox"/>
<b>SECTION 6</b>	Plumber's Concealed Leak Description of Work	<input type="checkbox"/>
<b>SECTION 7</b>	Plumber's Declaration	<input type="checkbox"/>
<b>ATTACHMENTS</b>	Copy of Licensed Plumber's Tax Invoice	<input type="checkbox"/>
	Photographic Evidence (if applicable)	<input type="checkbox"/>

Once completed please send form  
and any attachment to:

records@isaac.qld.gov.au OR

**Isaac Regional Council**  
PO Box 97 Moranbah QLD 4744 OR

Deliver in person to your local Isaac Regional Council Office

## DEPARTMENT USE ONLY

<b>PROCESSED BY</b>	Print Name	
	Signature	<b>DATE</b>