

# Decommissioning of a Septic Apparatus

To: **Manager Planning, Approvals & Environmental Services**  
**City of Joondalup**  
**PO Box 21**  
**Joondalup WA 6027**

Fax: 9300 1383

I, \_\_\_\_\_  
 (name of demolition contractor)

of \_\_\_\_\_  
 (address)

hereby declare that the septic system previously installed on Lot No \_\_\_\_\_ House No \_\_\_\_\_

Street Name \_\_\_\_\_ Suburb \_\_\_\_\_

was decommissioned on \_\_\_\_ / \_\_\_\_ / \_\_\_\_ in accordance with the provisions of Regulation 21 of the *Health (Treatment of Sewage and Disposal of Effluent and Liquid Waste) Regulations 1974*, in that;

- the apparatus was emptied in accordance with Regulation 46 of the abovementioned Regulations, and the provisions of the *Environmental Protection (Liquid Waste) Regulations 1996* (attach certification from liquid salvage contractor);
- the apparatus:  
 in the case of the septic tanks or aerobic treatment units, had the base of the tank broken and/or was ...  
 (please tick one):

backfilled in situ                       removed                       broken up and backfilled

**Total number of tanks decommissioned** \_\_\_\_\_

and the soak wells or leach drains were ...

backfilled in situ                       removed                       broken up and backfilled

**Number of soak wells/leach drains decommissioned** \_\_\_\_\_

and the resultant voids backfilled with clean sand and compacted.

Signed by the Demolition Contractor or his agent on this date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Print name \_\_\_\_\_ Signature \_\_\_\_\_