Permit for temporary exemption from water restrictions



Please read this first

This form will be scanned by electronic equipment. It is important that you:

- use a blue or black pen to complete this form; and
- print clearly.

Applicant (*Please print in CAPITALS*)

Title:	Mr	Mrs			N	liss				Ms															
Organis	ation (<i>if appl</i>	icable)						I		Í	I			I	1	1								1	
Contact	person first	names											I			1									
Contact	person surn	ame						1								1								1	
Postal a	ddress											1				 	1			 					
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Permit details

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Loca	ocation of the proposed activity (physical address)																												
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Tow	'n																							Pr	ope	erty	ID		

Please describe the activity or facility that requires water and the impact of the water restrictions:

Please describe the water use proposed, and explain why it is necessary in these exceptional times and if any alternative sources have been considered:

Proposed daily water use:	litres per day	
Signature of applicant		Date

Signature of applicant