

**Water Supply Connection/  
Alteration Application**



**Water Connection Fee: \$60.00**

City Infrastructure  
30 Laings Road  
Private Bag 31912  
Lower Hutt 5040  
New Zealand  
<http://www.huttcity.govt.nz>  
(04) 570 6715

**Site Details**

Address

Legal Description:

**Owner Details**

Name

Company

Postal Address

Contact phone

**Applicant Details** *(if not owner)*

Name

Authority to apply

Postal address

Contact phone

*Please tick all applicable boxes:*

- Subdivision
- Domestic
- Temporary Site Works
- Commercial
- Other .....

## Development Details

Type of development

Description of connection/alteration requirements

**A detailed site plan A4 size, must be attached to this application, showing existing water services and proposed works.**

## Privacy Statement

1. Personal information concerning you provided to Hutt City Council ("the Council"), whether contained in this application or otherwise obtained is provided and may be held, used and disclosed by the Council:
  - (a) to enable the Council to communicate with you for any purpose
  - (b) to enable the Council to provide you, or have provided to you, advice and information concerning products and services that the Council believes may be of interest to you
  - (c) to enable the Council to administer and maintain its records and carry out its required functions
  - (d) to enable the Council to advise the public of relevant services and organisations operating in Hutt City.
2. The personal information provided in this is collected by and will be held by the Council, whose address is Private Bag 31912, 30 Laings Road, Lower Hutt 5040.
3. The collection of this information is by
4. The supply of this information is mandatory and if you fail to provide any of the information the Council may be unable to process the application.
5. You have the right under the Privacy Act 1993 to obtain access to and to request correction of any personal information held by the Council concerning you.

**Council has a Privacy Officer. If you have any concerns regarding privacy issues please telephone 570 6666.**

## Signature

Signed by or on behalf of the owner

Name

Date

## Office Use Only

HAC Code: GL 1 3501 1002 000 0000

Receipt No:

Handling Officer:

Date: