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ABN: 68 284 130 046

Office Use:

Document ID:

Account No.:

WATER AND SEWER CONNECTION APPLICATION

All fields are required to be completed.

NOTE: The Property Owner is to complete this form.

Property Owner Details

Property Address: _____

Account Name: _____

Contact Number: _____ Email Address: _____

Postal Address (if different from property address): _____

Residential Address (if different from postal address): _____

Request

Licensed plumber installing service: _____

Type of service:

- New Water Connection – APPLICATION OF SUPPLY FORM TO BE COMPLETED
- Upgraded Water Connection Size of Meter to be upgraded to: _____
- New Sewer Connection
- Upgrade Sewer Connection

Acknowledgement

I understand and acknowledge that:

- The information provided in this request is true and complete to the best of my knowledge.
- I authorise Roxby Council to issue me an invoice as per the quote provided, with payment terms of 14 days and to make payment by the pay by date stated on the invoice issued or be subject to late fees and/or debt collection should it remain unpaid.
- I will be responsible for all quarterly charges as per the Roxby Water Supply Terms and Conditions

Signed: _____

Name (print): _____ Date: _____ / _____ / _____

OFFICE USE

Request Authorised Yes No Officer Signature _____

Quote provided to customer MAGIQ reference number: _____

CONTRACTOR USE

Meter number installed at property _____ Size of Meter _____

Sewer Connected Yes No Quantity: _____ Date of Installation _____