

# WATER SUPPLY CONNECTION/ ALTERATION APPLICATION



Does this water supply service application relate to a resource or building consent?

Yes, Consent no: \_\_\_\_\_

No

## SITE DETAILS

Address:

Legal Description:

## OWNER DETAILS

Name:

Company:

Email:

Postal Address:

Contact phone:

## APPLICANT DETAILS *(if not owner)*

Name:

Company:

Email:

Postal Address:

Contact phone:

## DEVELOPMENT DETAILS

Type of development  
*Please tick all applicable boxes:*

Subdivision

Domestic

Temporary Site Works

Commercial

Other

Fire connection/sprinkler

Description of connection/alteration requirements (including connection size)

**Note: A detailed site plan minimum A4 size must be attached to this application, showing existing water services and proposed works. The application cannot be approved without a plan.**

Only approved contractors can put new connections in place. Take a look at Wellington Water's list of approved contractors at: [wellingtonwater.co.nz/your-water/approved-water-supply-connection-contractors](http://wellingtonwater.co.nz/your-water/approved-water-supply-connection-contractors)

Refer also to Upper Hutt City Council Water Supply Bylaw 2008, which is online at: [Water Supply Bylaw 2008](#) (Scroll down to 'Water Supply Bylaw').

## PRIVACY STATEMENT

Council may hold, use and disclose personal information you have provided:

- to communicate with you for Council purposes;
- to tell you about products and services it believes may be of interest to you; and
- to enable it to maintain its records and carry out its statutory functions.

You have the right under the Privacy Act 1993 to access, and have corrected, information held by Council, which is at 838-842 Fergusson Drive Upper Hutt, ph 04 527 2169

## SIGNATURE

Signed by or on behalf of  
the owner

Name:

Date:

**APPLICATION FEE** – Please refer to our Schedule of Fees and Charges online

<https://www.upperhuttcity.com/Your-Council/Plans-policies-bylaws-and-reports/Fees-and-charges/Water-supply>

*Total Fee:*

### Office use only

Receipt no:

Amount:

Date:

Handling Officer: