

Wastewater access request

To be completed by the director of the company that will be accessing or connecting to the wastewater network, or another authorised person Please complete and return this form to

Email: networkauthorisation@water.co.nz

Phone: (09) 442 2222 Website: www.watercare.co.nz

Important information

Please note charges apply for processing this application. Full payment must be received before any approval is granted. See www.watercare.co.nz for fee details. (refer to 'application processing fees and site inspections' in our pricing schedule).

To avoid delays, please include all the required information. Our website has the full checklists for each application.

1. Applicant details						
First name	Last name					
Company						
Business address:						
Street number Street name						
Suburb		Postcode				
Work phone ()	Mobile					
Email						
2. Site and job details						
Site address						
* If there are multiple locations, please attach a						
Please describe the job below and attach a plan from our GIS with the manhole ID. You can find this from GIS https://www.watercare.co.nz/Water-and-wastewater/Building-and-developing/GIS-maps						

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Proposed access date:	DD / MM / YYYY						
Are you requesting annual access? *This is permitted for non-entry access only. Yes No							
If you have answered yes, please sign the authorisation below							
3. Billing detail Details of the person pa	ils aying the fees for this application (if o	different from above). So	ee www.watercare.	co.nz for fee details.			
First name	Last na	ame					
Company (if applicable)							
Postal address:							
Street number	Street name or PO Box						
Suburb			Postcode				
Email							
Phone ()		Mobile					
Please send my bills by Email Post							

4. Terms and conditions

- The work must be carried out in accordance with Watercare codes of practice and standard operating procedures, without damage to the wastewater network.
- The person carrying out the work must complete a job safety analysis with appropriate controls to manage traffic, pedestrians, biological substances, gases (methane, hydrogen sulphide), animals, illegal substances and any other hazards relevant to the work. The work must be carried out in accordance with the controls in the job safety analysis.
- All other necessary approvals, permits and notifications (for example approvals from Vector or WorkSafe, or traffic management approval from Auckland Transport) must be obtained before work begins.
- If any Watercare assets are damaged in carrying out the work, those on site must notify Watercare immediately on 09 442 2222. All costs associated with the repair will be recovered by Watercare.
- If asset faults such as a blocked public pipe or a cracked manhole lid are discovered, Watercare must be notified immediately.
- A copy of this approval must be kept on site at all times.
- All staff must carry photo identification.
- Nothing in this approval, including the conditions of approval, limits Watercare's rights and powers under the Water Supply and Wastewater Network Bylaw 2015 or any Act (in particular the Local Government (Auckland Council) Act 2009 and the Local Government Act 2002) and/or under the general law in relation to the protection of its network, and/or liability by the company or any other person for damage, misuse or interference to its network
- Watercare's approval is limited to authorising access to its wastewater network, as specified in this application.
 Watercare has no liability to the company accessing the network, or any other person in relation to the works carried out or any consequences of those works.

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Declaration

These are mandatory requirements. If the work does not require entry into a manhole, please tick the boxes under the non-entry section only to confirm each statement. If the job involves entry into a manhole, please tick all boxes under entry and non-entry into manhole sections to confirm each statement.

Non-e	ntry into manhole					
	have read, understand and will comply with the terms and conditions in section 4 and will only carry out work as per this approval					
	The company has and follows health and safety procedures that coat Work Act 2015.	mply with the	requirements of the Health and Safety			
	All staff undertaking the work have been fully immunized and has h	ad appropria	te vaccination			
	ll staff undertaking the work have the required safety training, equipment and can assess hazards and implement ontrols					
	ll staff undertaking the work have obtained unit standard 25510 or 3058 in gas detection by an organisation ccredited by NZQA.					
	all works will be carried out in accordance with Watercare's code of practice and standard operating procedures, without causing any damage to the wastewater network.					
	I am aware of the flow variation on the network due to this operation and overflow events and have controls in place as per the attached methodology for managing wastewater flows.					
	I am aware of the potential gas hazards when opening a manhole and ensure that the lid will be securely replaced upon completion of work.					
Entry i	nto manhole (Please ensure all of the above has been ticked)					
	All staff undertaking the work have obtained unit standard in confined space entry by an organisation accredited by NZQA.					
	understand the confined space risk score decision tree					
	I have attached the specific job safety analysis with the appropriate controls to manage hazards on site					
	I have attached evidence of the confined space permitting system for all staff entering the manhole					
	I have attached the methodology for the specific works					
	I declare that I am authorised to sign on behalf of the company application is true and correct. I agree to pay all applicable chaterms and conditions of this approval.	y and all the arges for the	information given on this services indicated and accept the			
Name		Signature				
Job titl		Date	DD / MM / YYYY			
	(Company director or authorised person)					
	office use only oved by:					
Name		Signature				
Autho	prisation valid until: DD / MM / YYYY	Date	DD / MM / YYYY			

08-2025