

Non-domestic wastewater audit

Find out how much we should charge for your wastewater

Please complete and return this form to
Post: Watercare, Private Bag 94010, Auckland 2241
Email: info@water.co.nz
Phone: (09) 442 2222 Website: www.watercare.co.nz

Important information

Email this form to info@water.co.nz with the subject line 'wastewater audit' or post it to the address above.

1. Property details

Water meter number(s) associated with this application

1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Watercare account number -

Property address:

Street number Street name

Suburb Postcode

2. Current property owner

Details of the person responsible for paying the ongoing water and wastewater charges. Please do not give the tenant's details.

First name Last name

Company (if applicable)

Postal address:

Street number Street name or PO Box

Suburb Postcode

Email

Phone () Mobile

Please send my bills by Email Post

Note: If the property is soon to be sold or leased, we still need the present owner's name. They must inform us when the ownership changes.

3. Your details

Same as legal owner (go to section 4) If you are not the legal owner, you must attach a signed legal authority to act on their behalf.

First name Last name

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. Your water use Please tick the audit that relates to your water use

Recipe audit This is when you use water to make an end product, e.g. drinks or shampoo.
We may ask you to provide:

- Production data for a set time
- Meter readings from the production area

Check meter audit You may need to install a check meter if you use water for:

- Cooling towers
- Boiler steam units
- Irrigation systems

Combination audit This is a combination of the two audits above.

Do you have any other sources of water?

Rain tank

Bore

Other – please specify

5. Cost and timeframe

1. Please visit our website www.watercare.co.nz and search for ‘non-domestic charges’ for the cost of a wastewater audit. Audits requiring more detailed analysis may take more than two hours to complete. The fee is payable by the applicant. We will discuss all costs with you before we do the audit. If we do not do an audit, there will be no fee.
2. In some circumstances, we may ask you to install water-check meters. If you choose to do so, you will be responsible for any associated costs.
3. Missing information may delay this application.
4. We will assess your application and contact you within 10 working days.

Authorisation

I confirm that I wish to request a wastewater audit for the property identified on this form and am liable for the cost of the audit. I am authorised to make this application in the name of the legal owner and in doing so, I acknowledge that the terms and conditions of the customer contract with Watercare apply whenever a property is connected to Watercare’s network.

Name Signature

Date

Please note: Submitting this form does not guarantee a wastewater audit. We assess each application individually.

Privacy

We may use this information to process your application, update our records or help improve our services. We will not disclose it unless required by law. You have the right to access your information, and you can ask us to correct any errors.