

Request for Variation to Existing Liquid Trade Waste Approval



Date.....

Address: Suburb: Section: Block:

	Add all relevant information	Circle/Highlight relevant option
Business name		
Building Name/Number (if applicable)		
Unit/shop number		
Existing Approval attached?		
Business activity (e.g. food retail, motor trades, laboratory wastes, etc.)		
List of pre-treatment (e.g. sink strainers, grease trap, cooling pit, CPI/VGS, etc.)		
Maximum number of restaurant seats (for food retail)		
Opening hours (for food retail)		
Fixtures discharging to sewer (e.g. sink, dishwasher, wok stove, floor drain etc.)		
GIT identification number (where multiple grease traps on site, or multiple connections to a common grease trap)		Grease Trap Identification form attached?
Previous business details (if applicable)	Name :	Tenancy number:
Person authorised to make this request	Name, Position & Company:	Phone: Email:
Tenant contact details	Name of person for day to day contact:	Phone: Email:
Have modifications or additions been made to existing drainage? (if yes, new drainage plan must be attached)		Drainage plan attached?
Notification of approval	Name:	Email: Ph:

Please note: If connecting to/using an existing connection to an existing shared grease trap, an updated copy of the grease trap identification form signed and dated by the owner (or authorised representative) of the grease trap must be attached.