

Application for Consent to Discharge Trade Waste

Application to discharge trade waste to the public sewage system under the Kāpiti Coast District Council Trade Waste Bylaw 2019

This is an application for:

- ☐ a proposed new discharge
- ☐ an existing discharge for which no consent exists
- ☐ variation to an existing consent.

1. Applicant details

Business name:

**NZBN or
copy of registration:**

Applicant name:
(individual or company)

Trading name:
(if different from above)

Address:

Postal address:
(if different from above)

Contact phone:

Contact email:

**Proposed opening date or date
of takeover:**

2. Trade waste details

Trade waste manager:

Contact phone:

Contact email:

After hours contact name:

After hours contact phone:

Trade activity:

(description of what the business does)

3. Discharge data

Discharge timing:

(please tick one)

☐ Continuous

☐ Intermittent

Hours of operation:

(over what periods of the day is the discharge occurring?)

Flow:

(what is the estimated daily flow?)

Discharge description:
(what is the nature/type of discharge?)

4. Pre-treatment

Pre-treatment of waste:
(grease traps, interceptors, pH adjusting tanks etc)

Pre-treatment type:
(bioremediation, mechanical, other treatment types)

Location of pre-treatment installed:

List of processed chemicals discharged into wastewater network:
(include material safety data sheets (MSDS) if applicable)

Number of compartments in pre-treatment device:

Size of pre-treatment: (could be in litres or the dimensions of it)

Cleaning/servicing frequency:

Servicing contractor: (indicate name and provide a proof of service engagement)

Contractors used to recycle/dispose of waste: (e.g. used cooking oil, used motor oil, etc)

Spill control system:
(how will you ensure stormwater is practically separated?)

5. Statement

I am duly authorised to make this application & believe that all the information contained in this application is true & correct.

Name:

Position:

Signature:

Date:

Submitting application

Email completed forms to:

licence.application@kapiticoast.govt.nz

Post to:

Compliance Services
Kāpiti Coast District Council
Private Bag 60601
Paraparaumu 5254

or deliver to:

Compliance Services
Kāpiti Coast District Council
175 Rimu Road
Paraparaumu

Office administration staff to complete

**Application received and
checked by:**

Date:

Application approved by:

Date:

Consent number:

Application fee:

Receipt: