

ELIGIBILITY CRITERIA

This form must be submitted with a line itemised tax invoice and receipt of payment in full within 60 days of the works being performed and forwarded to Singleton Council. The following conditions apply to all Plumbing Reimbursement Claims:

1. Invoice date must not predate completion of work
2. Claims must be submitted within 60 days of the work being performed
3. All Claims must include a line itemised copy of the tax invoice and proof of payment
4. All rejected claims must be resubmitted within 10 days of rejection being received for your application to be reassessed
5. Plumbers conducting the work must be appropriately licenced
6. Plumbers cannot be reimbursed by Council when additional plumbing work is conducted for the customer at the time of attendance for the issue
7. Claims are not valid for plumbers conducting work at their own property
8. Claims will not be paid without customer details and signatures provided
9. The issue must be found to be in Council's area of responsibility
10. Council reserves the right to provide full, part or no reimbursement depending on the work carried out
11. No reimbursements will be provided for any call backs to the property
12. The property must be connected to the Council's water supply system
13. On verification of eligibility by Council, the reimbursement will be paid as a cheque directly to the customer; Council will not pay plumbers bills directly.

APPLICANT DETAILS

Name/s (individual/company/managing agent)					
Postal Address					
Suburb				State	Post Code
Contact Number				Mobile	
Email					

PROPERTY DETAILS

Number	Street	Suburb	Lot	Section	DP
Assessment Number					

PAYEE DETAILS

Name/s (individual/company/managing agent)					
Postal Address					
Suburb				State	Post Code
Contact Number				Mobile	
Email					

PLUMBER DETAILS					
Name/s (individual/company)					
Postal Address					
Suburb		State		Post Code	
Licence Number		Licence Expiry Date			
Date Plumber was contacted		Time Plumber was contacted			
Date Plumber arrived on site		Time Plumber arrived onsite			
Were you charged by your plumber for reification		<input type="checkbox"/> Yes <input type="checkbox"/> No			

DETAILS OF WORK CARRIED OUT		
What network was the works carried out on	<input type="checkbox"/> Water Network <input type="checkbox"/> Sewer Network	
Description of works carried out		
Location of Blockage or Issue		
Are you claiming a full or part reimbursement	<input type="checkbox"/> Full <input type="checkbox"/> Part	
Amount Claimed		

DECLARATION		
<input type="checkbox"/> I have read and understand the Eligibility Criteria stated on the front of this form.		
<input type="checkbox"/> I have attached a copy of the tax invoice and proof of payment for the work carried out by a licensed plumber and understand that this will be retained by Council:		
<input type="checkbox"/> I declare that the information provided in this application and all supporting documentation and evidence is true and correct.		
Name	Signature	Date
Please be aware it is a criminal offence to make a false declaration		

Click the below button to submit this form via email

PRIVACY NOTIFICATION

Personal and private information supplied to Council is managed in compliance with the *Privacy and Personal Information Protection Act 1998*, *Government Information Public Access Act 2009* and Council's Privacy Management Plan. The supply of information on this form is voluntary but it is required to process your application/request. The [Privacy Management Plan](#) may be accessed on Council's website. If you have any further enquiries concerning Privacy matters, contact Council's Privacy Officer on 02 6578 7290.

