

2 BC ys Home Rd Newhaven, Vic 3925 F | 1300 720 711 F | 03 5956 4101 westport@westernportwater.com.au ABN | 63 759 106 755

APPLICATION FOR SPECIAL CONSIDERATION FOR HIGH WATER USAGE

Please not each property is eligible to receive one allowance every five years

	opens, to englate to recent of end anomalies of end yours		
PROPERTY DETAILS			
Account Number:			
Unit Number: Street Number:	Street Name:		
Suburb:	Post Code:		
CONTACT DETAILS			
Surname:	First Name: Other Names:		
Telephone:	Mobile: Email:		
Mailing Address (If different from above)			
Unit Number: Street Number:	Street Name:		
Suburb:	Post Code:		
Please state briefly the reason for your application:			
Was this the result of a leak? Yes	No If Yes, evidence of repair must be attached.		
Signed:			
Date: / /			



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Office Use Only			
To be completed by Westernport Water			
APPROVAL			
Approved:			
Not Approved:			
Please state briefly the reason if Not Approved:			
CRM·			
Current Consumption: kL_	Current Consumption Costs \$		
Discount to be applied: kL_			
To be charged: kL	New Consumption Costs \$		
Value of discount applied: \$			
Name:	Approved By:		
Signed:	Signed:		
Date: / /	Date:		
COMMENTS:			
NOTIFICATION			
Customer Notified: Date:			
Amended Account Sent: Date:			
Name:			
Signed:			
Date: / /			
	INT07-01271		