

Business Name: \_\_\_\_\_

ABN: \_\_\_\_\_

Registered Address: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Daytime contact number: \_\_\_\_\_

After hours contact number: \_\_\_\_\_

Number of tankers: \_\_\_\_\_

Tanker Capacity	Vehicle Registration Number	Usual Filling Point

Purpose for taking water:

\_\_\_\_\_

\_\_\_\_\_

I, \_\_\_\_\_ acknowledge that the use of water tankers during PWSR / Stage 1 / Stage 2 / Stage 3 / Stage 4 restrictions (circle relevant) has been explained to me and I undertake to abide by these conditions.

**Signed:**

\_\_\_\_\_

**Print Name:**

\_\_\_\_\_

**Date:**

\_\_\_\_\_

Coliban Water  
Box 2770  
BENDIGO DC VIC 3554

Telephone: 1300 363 200  
Fax: 5434 1341  
www.coliban.com.au

**Office use only:**

Permit Number:

\_\_\_\_\_

Avdata Key Number:

\_\_\_\_\_

**Acknowledgement signed:**

Date: \_\_\_\_\_

Initials: \_\_\_\_\_

