



Comhairle Chontae Uibh Fhaili
Offaly County Council

NOTIFICATION FORM

**SITE ASSESSMENT IN ACCORDANCE WITH E.P.A CODE OF PRACTICE WASTEWATER
TREATMENT AND DISPOSAL SYSTEMS SERVING SINGLE HOUSES (p.e. ≤10)**

1a. Applicant Name:

1b. Assessors Name & Company

2. Contact Tel. No:

3. Site Address:

4. Address for Correspondence:

5. Email Address:

**6. Date and Time of P & T and site
characterisation test to be carried
out.**

**7. Description of
Proposed Development:**

No of Sites: _____

8. Location of proposed dwelling:

9. Site Area (Acres / Hectares):

**10. Has the site or any part of the site
undergone percolation test by
Offaly County Council:**

Yes: ☐

**No: ☐ If yes, please state reference
number: _____**

**If yes, please outline what site
improvement works/changes have
been made prior to this
application:**

11. Name and address of Landowner: _____
(Refer to attached form)

12. Source of Water Supply for Proposed Development:
(Please tick appropriately)

Proposed bored well ☐
Existing well ☐
New public mains connection ☐
Existing public mains connection ☐
Group Water Scheme ☐
Name of Scheme _____

13. Name of Public/Group Water Supply Scheme within 1KM (if applicable) _____

Please note:

- Offaly County Council requires 2 weeks notice of test date
- Trial and test holes to be kept open for 4 weeks after the date of carrying out the test, unless otherwise advised by the Council.

PLEASE ENSURE THAT THE FOLLOWING ARE ENCLOSED WITH YOUR COMPLETED NOTIFICATION, FAILURE TO DO SO WILL RESULT IN YOUR NOTIFICATION BEING RETURNED TO YOU.

- **Proof of Suitably Qualified status – Assessors qualifications to complete assessment**
- **Evidence of Professional Indemnity of €1,000,000**
- **Written confirmation from the landowner confirming that :**
 - a. Council officials are permitted onto the lands for inspection/auditing purposes, and
 - b. That there are no livestock on the site or entry lands to the site for the duration of the site visits. (Template for Consent Form attached)
- **1 no. 6" Ordnance Survey Maps or 2 no. Discovery Series Maps.**
 - a. The proposed site must be outlined in red.
- **1 no. Site Location Maps of the area to be to a scale of 1/2500.**
 - a. The proposed site must be outlined in red, the north point indicated and the relevant Ordnance Survey Sheet number should be included.

- b. Access to the site and position of Site Suitability Assessment Site *Notice* (copy attached) should be clearly shown.
- c. The site location map must show all up to date development on adjacent sites within **250m radius**. It should include buildings, wells, septic tanks, proprietary treatment systems and percolation areas, streams and water courses denoting distances to relevant site.
- **1 no. Site Layout Plans to minimum scale of 1/500.**
 - a. The proposed site must be outlined in red, the north point indicated and it should show contours/ levels.
- **If for exceptional reasons you wish to postpone or cancel the Site Suitability Assessment, a minimum of 1 working day's notice is required. For out of office hours, a message may be left at the following number 057 9357403.**
- **The completed Notification Form shall be submitted to Environment & Water Services Section, Offaly County Council, Áras an Chontae, Charleville Road, Tullamore, Co. Offaly**

SIGNED: _____
Applicant/Agent

Date: _____

OFFICIAL USE ONLY

Is form satisfactorily completed: Yes ☐ No ☐

SIGNED: _____ DATED: _____

OFFICIAL USE ONLY

Assessment Notes: _____

SIGNED: _____ **DATE:** _____



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LANDOWNER CONSENT FORM

I _____ CONSENT TO THE FOLLOWING:

1. COUNCIL STAFF ARE PERMITTED ONTO MY LANDS FOR
INSPECTION/AUDITING PURPOSES FOR SITE SUITABILITY ASSESSMENTS

2. THERE ARE NO LIVESTOCK ON THE SITE OR ENTRY LANDS TO THE SITE FOR
THE DURATION OF THE SITE VISITS.

SIGNED: _____
LANDOWNER

DATE: _____

SITE NOTICE

SITE SUITABILITY ASSESSMENT

APPLICANT NAME: _____

LOCATION (TOWNSLAND): _____

DATE: _____