

**Declaration Installation of Termite Management System
Submission at Building Approval**

Permit Number: _____

Owner: _____

Building Type: _____

Site Address: _____

Real Property Description: Lot: _____ Plan: _____

Termite Management Installer: _____

Termite Management Installer Licence No.: _____

Details of Termite Management System to be Installed: _____

Name of System/Type of Termite Management to be Installed: _____

DATE: ____/____/____

Signature (Licenced Pest Controller / Builder / Applicant) (*See Privacy Statement Below)

DISCLAIMER

The Gympie Regional Council shall not be liable to any person under any circumstances whatsoever arising by virtue of a claim for breach of warranty (express or implied), tort (including negligence), strict liability or otherwise for actual incidental, contingent, special or consequential damage or lost profits or revenues arising directly or indirectly from or out of (but not restricted to) any claim arising out of the inaccuracy of any information contained in this declaration.