Application for an undertaking

Section 30 of the *Safe Drinking Water Act 2003*

A function of the Secretary of the Department of Health is to monitor and enforce compliance with the *Safe Drinking Water Act 2003* (the Act) and the *Safe Drinking Water Regulations 2025* (the Regulations) as per section 27 of the Act.

The Secretary may accept a written undertaking under section 30 of the Act by the water supplier or water storage manager (referred to from here collectively as 'water agency') to take specified action within a specified period or periods, or to refrain from taking specified action –

- to stop the contravention from continuing or occurring again; and
- to eliminate or minimise the consequences of the contravention.

Information provided in this application will be used by the Secretary to determine whether to accept an undertaking by the water agency. The Secretary may not accept an undertaking in relation to a contravention of section 34 of the Act (any drinking water supplied by, or in the possession of, a water supplier or water storage manager is, or may be, or may become, a risk to public health).

The water agency may use additional pages appended to this application if required.

Water Agency Information*

Name:

Position:

Water Agency Name:

Address:

City:

State: Postcode:

Email address:

Telephone:

***This information will be used for written communication from the Secretary to the water agency. The obligation will be on the water agency to notify the Secretary of any changes.**

Undertaking information

(a) Identify and detail the act, or failure to act, that constitutes, that constituted or will constitute, the contravention of the Act or the Regulations. The undertaking may deal with more than one contravention of the Act or the Regulations, regardless of whether or not the contraventions are of the same nature. Please specify each contravention clearly in part (a) and respond to the questions at (c) to (i) for each contravention. Include information about assessment of risks to public health associated with this undertaking.

(b) Period during which the undertaking is to apply

Start Date: (dd/mm/yyyy)

End Date:

Reason(s) for the requested period:

(c) If applicable, detail the specified action(s) to be undertaken by the water agency to stop the contravention from continuing or occurring again, and to eliminate or minimise the consequences of the contravention. Include a timeline (dd/mm/yyyy) **for each action to be completed.**

(d) If applicable, detail the specified action(s) that the water agency will refrain from taking to stop the contravention from continuing or occurring again, and to eliminate or minimise the consequences of the contravention. Include a timeline (dd/mm/yyyy) **for each action to be completed.**

(e) Identify and provide details regarding the relevant water supply or water supplies for which the undertaking applies (i.e. water sampling area including towns, cities and/or suburbs, population size, vulnerable customer types, complaints, illnesses).

(f) Detail the water treatment plant and treatment processes used for the relevant water supply or water supplies and which water agency is responsible for the treatment plant and any secondary treatment.

(g) Detail the validation process, actions and evidence to demonstrate that the actions in parts (c) and (d) are effective in preventing a further contravention of the act outlined in part (a). Include timeframe(s) (dd/mm/yyyy) **for the process, actions and evidence.**

(h) Detail the validation process, actions and evidence to demonstrate that the contravention outlined in part (a) does not exist across other water sampling areas. Include the timeframe(s) (dd/mm/yyyy) **for the process, actions and evidence.**

(i) Provide any other information deemed appropriate by the water agency regarding this contravention.

Declaration by the water agency

I hereby apply for an undertaking under the provision of section 30 of the Act. I declare that the information supplied in preparing this application is true.

Name:

Position:

Signature:

Date:

This undertaking application form is to be submitted to:

Email: water@health.vic.gov.au

To receive this document in another format, phone using the National Relay Service 13 36 77 if required, or email Environmental Public Health and Water <water@health.vic.gov.au>.

Authorised and published by the Victorian Government, 1 Treasury Place, Melbourne.

Available at health.vic <https://www.health.vic.gov.au/water/guidance-notes>