

**Applicant Details:**

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

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

Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

Acting for:  Purchaser  Proprietor  Vendor

**Certificates Required:**

- |  |          |  |          |
|--|----------|--|----------|
| <input type="checkbox"/> Section 10.7 (2) Certificate              | \$62     | <input type="checkbox"/> S608 Certificate              | \$70     |
| <input type="checkbox"/> Section 10.7 (2 & 5) Certificate          | \$156    | <input type="checkbox"/> Certificate of Rates (S603)   | \$95     |
| <input type="checkbox"/> Section 10.7 (2 & 5) Building Entitlement | \$156    | <input type="checkbox"/> Water Meter Read              | \$107.10 |
| <input type="checkbox"/> Drainage Plan (Internal)                  | \$63.25  | <input type="checkbox"/> Urgency Fee (within 24 hours) | \$123.90 |
| <input type="checkbox"/> Sewer Plan (External)                     | \$115.10 | <input type="checkbox"/> Informal request to view file | \$60     |
| <input type="checkbox"/> 735(A) Outstanding Notices                | \$70     |  |          |

**Property Location Details:**

Parish: \_\_\_\_\_ County: \_\_\_\_\_ Town/Village: \_\_\_\_\_

House Number: \_\_\_\_\_ Street Name: \_\_\_\_\_ Nature of Property: \_\_\_\_\_

**Legal Description:**

Lot Number: \_\_\_\_\_ Deposited Plan (DP) Number: \_\_\_\_\_

Portion: \_\_\_\_\_ Section: \_\_\_\_\_ Folio/Volume: \_\_\_\_\_

Council Assessment Number: \_\_\_\_\_

**Registered Proprietor's/Vendor's/Purchaser's Details:**

Proprietor's Full Name: \_\_\_\_\_ Occupant's Name: \_\_\_\_\_

Proprietor's Full Address: \_\_\_\_\_

Vendor's Full Name: \_\_\_\_\_

Vendor's Full Address: \_\_\_\_\_

Purchaser's Full Name: \_\_\_\_\_

Purchaser's Full Address: \_\_\_\_\_

Purpose of Inquiry: \_\_\_\_\_

*Please print, sign and return to Coonamble Shire Council*

Signature of Applicant: \_\_\_\_\_

Date: / /

**Office Use Only**

Received: \_\_\_\_\_

Receipt #: \_\_\_\_\_

Asst #: \_\_\_\_\_