

**Applicant's Details:**

First and last name: \_\_\_\_\_

Full address details: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Acting for: (please check the appropriate box)  Proprietor  Purchaser  Vendor

**Certificates Required:**

<input type="checkbox"/> Section 10.7 (2) Certificate	\$53	<input type="checkbox"/> 735(A) Inspection Required	\$120
<input type="checkbox"/> Section 10.7 (2 & 5) Certificate	\$133	<input type="checkbox"/> S121ZP Certificate	\$70
<input type="checkbox"/> Section 10.7 (2 & 5) Building Entitlement	\$133	<input type="checkbox"/> S608 Certificate	\$70
<input type="checkbox"/> Drainage Plan (Internal)	\$60	<input type="checkbox"/> Certificate of Rates (S603)	\$85
<input type="checkbox"/> Sewer Plan (External)	\$110	<input type="checkbox"/> Water Meter Read	\$102
<input type="checkbox"/> 735(A) Outstanding Notices	\$70	<input type="checkbox"/> Urgency Fee (within 24 hours)	\$118

**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 name: \_\_\_\_\_ Occupant's name: \_\_\_\_\_

Proprietor's address: \_\_\_\_\_

Vendor's name: \_\_\_\_\_

Vendor's address: \_\_\_\_\_

Purchaser's name: \_\_\_\_\_

Purchaser's address: \_\_\_\_\_

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

*Please check certificates required section has been completed accurately, then, sign and return to Coonamble Shire Council*

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

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
          dd    mmm    yy

**Office Use Only** Received: \_\_\_\_\_

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

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