



PROPERTY CERTIFICATE APPLICATION – 2022/23

I hereby apply for the undermentioned certificate(s) for the property described herein:

- | | | |
|---|-------|----------|
| <input type="checkbox"/> Certificate under Section 603 (Local Government Act 1993) | _____ | \$ 90.00 |
| <input type="checkbox"/> Water Meter Reading (Local Government Act 1993) | _____ | \$101.00 |
| <input type="checkbox"/> Certificate under Section 735A (Local Government Act 1993) | _____ | \$ 75.00 |
| <input type="checkbox"/> Certificate under Schedule 5 (Environmental Planning & Assessment Act 1979) formerly Section 121ZP | _____ | \$ 75.00 |
| <input type="checkbox"/> Certificate under Section 88G (Conveyancing Act 1919) | _____ | \$ 50.00 |
| <input type="checkbox"/> Certificate under Section 10.7(2) (Environmental Planning & Assessment Act 1979) | _____ | \$ 62.00 |
| <input type="checkbox"/> Certificate under Section 10.7(2) & (5) (Environmental Planning & Assessment Act 1979) | _____ | \$156.00 |
| <input type="checkbox"/> House Drainage/Sewer Plan (Local Government Act 1993) | _____ | \$ 77.00 |
| <input type="checkbox"/> Dwelling Entitlement Search | _____ | \$205.00 |
| <input type="checkbox"/> Urgency Fee - 2 day delivery | _____ | \$102.50 |
| <input type="checkbox"/> Electronic Service Delivery | _____ | \$ 10.25 |

NOTE: Property Certificates are issued by Assessment.

DESCRIPTION OF LAND

House No. _____ Street _____ Locality _____

Lot _____ Section _____ DP/SP _____ Land Area ha/m² _____

Owner's Name _____

Applicant Name _____

Applicant Address _____

Applicant Reference _____

Return Certificate by: **CHOOSE ONE ONLY i.e. if you request email, you will not receive a hard copy**

- Pickup at Council Offices Post Email Fax

Provide details ie. Address/email/fax _____

Privacy Statement

The information and personal details provided by you on this Form are managed in accordance with the *Privacy and Personal Information Protection Act 1998* and Cootamundra-Gundagai Regional Council's policies and procedures as outlined in Council's *Privacy Management Plan*. Should you choose not to provide this information (wholly or in part) this may impact upon consideration of the matter by Council. The information will ultimately be stored in Council's records system.

I hereby acknowledge that the above information has been read and checked by myself and represents the property on which I wish Cootamundra-Gundagai Regional Council to issue the appropriate Certificate.

Applicant signature _____ Print Name _____

Date _____ Phone Number _____

OFFICE USE ONLY

Amount Paid: \$ _____ Date: _____ Assessment: _____

Receipt No. _____ Cashier: _____ Doc ID no. _____

Cert Ref. _____



Please process payment for _____ to the below credit card.

CREDIT CARD PAYMENT DETAILS

Cardholder Name: _____

Card Type: Visa
 MasterCard

Card Number: _____ / _____ / _____ / _____

Expiry Date: _____ / _____

CCV Number: _____

(Payment cannot be processed without a CCV number and your request will be returned if not supplied)

Amount: \$ _____

Applicant Signature: _____

Contact Name: _____

Contact Number: _____

Date: _____

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