

SECTION 149(2) & (5) CERTIFICATE APPLICATION

Application made for:

- Certificate under Section 149(2)
- Urgency Fee
- Certificate under Section 149(2) & (5)

Return to DSU

- Pick-up Post
- Date of Pick-up:/...../.....

Received by:

Prepared by:

Checked by:

APPLICATION DETAILS

Applicant: Phone:

Applicant's Reference:

Applicant's Postal Address:

House No.

Street

Suburb

Postcode

Owner's Name:

DESCRIPTION OF LAND

Lot No. Section DP/SP

House No. Street

Suburb Parish

Privacy Note: Personal information provided on this form will be used by Council officers only for processing purposes and, where legislation requires, may be referred to other Government agencies.

Fee Payment: The fee payment (where applicable) may be by cash, cheque or credit card. Please complete the credit card debit authority below if this is the preferred method of payment.

Please debit my (Tick as applicable)

- Bankcard
- Mastercard
- Visa Card

Credit Card No.

| | | | | | | | | | | | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|
| | | | | | | | | | | | | | | | | | | | |
|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|--|

Card Expiry Date: Amount: \$

Cardholder's Name: Phone No:

Cardholder's Signature: Date:

OFFICE USE ONLY

Authorisation No:

.....

Receipt No: