

## Application for Building Certificate

Environmental Planning and Assessment Act 1979, Section 6.24(1)

To complete the form, please place a cross in the boxes  $\square$  and fill out the white sections as appropriate. To minimise delay in receiving a decision about your application, please ensure you submit all relevant information.

1. Details of the applicant			
The Applicant is (please tick ✓) –			
lacksquare the owner of the building or the owner's solicitor, architect or	agent;		
The purchaser under a contract for sale of property which cor the purchasers solicitor or agent;	nprises or includes the building or part or		
A public authority which has, before making this application sowner;	served a copy of the application on the		
A lawful occupier of Crown lands which comprise or includes whom, the lands are lawfully contracted to be sold; or	the building or part, being a person to		
A person with the consent in writing of the owner of the buildingent.	ing or part, or the owners solicitor or		
Does the application apply to the whole of the property (all bu	ildings) or part only		
☐ Whole			
Part (describe which part)			
Mr Ms Mrs Dr Other			
First name Family name			
Flat/street no. Street name			
Suburb or town	State Postcode		
Daytime telephone Fax	Mobile		
2 Owner Details and Concent (only if annihous is	and the council		
2. Owner Details and Consent (only if applicant is			
The owner(s) of the land to be certified must sign the appl  If you are not the owner of the land, you must have all the own			
Crown land, an authorised officer of the Department of Land a application.			
Mr Ms Mrs Dr Other			
First name Family name			
Flat/street no. Street name			
Suburb or town	State Postcode		
Capatio of town	- Colodac		
Daytime telephone Fax	Mobile		

2.	Owner Details ar	d Consent Con't (only if applicant is not the owner)		
	As the owner(s) of the above property, I/we consent to this application:			
	Signature			
	Signature			
	Name			
	Name			
	_			
	Date			
3.	Details of the lan	d		
	Flat/street no.	Street name		
	Suburb or town	Postcode		
	Lot no.	Section		
	DP/MPS no.	Volume/folio		
	DI 7WII O NO.	Volume/folic		
	If the level is Crown leve			
	If the land is Crown land Lease no.	: Type of holding		
		7,144 3		
5.	Applicant Signat	ure		
5.		ure he applicant's agent, must sign the application.	-	
5.		he applicant's agent, must sign the application.	<b>1011</b>	
5.	The applicant, or t		/ou	
5.	The applicant, or t	he applicant's agent, must sign the application.  In what capacity are you signing if y	/ou	
5.	The applicant, or t	he applicant's agent, must sign the application.  In what capacity are you signing if y are not the applicant	/ou	
5.	The applicant, or t	he applicant's agent, must sign the application.  In what capacity are you signing if y are not the applicant	/ou	
5.	The applicant, or t	he applicant's agent, must sign the application.  In what capacity are you signing if y are not the applicant	/ou	
5.	The applicant, or t	he applicant's agent, must sign the application.  In what capacity are you signing if y are not the applicant	/ou	
	The applicant, or to Signature  Name, if you are not	he applicant's agent, must sign the application.  In what capacity are you signing if y are not the applicant  but the applicant  Date	/ou	
<ol> <li>6.</li> </ol>	The applicant, or to Signature  Name, if you are not some of the second	In what capacity are you signing if y are not the applicant  bt the applicant  Date  LY:	/ou	
	Name, if you are not office USE ON Payment Amount	he applicant's agent, must sign the application.  In what capacity are you signing if y are not the applicant  but the applicant  Date	/ou	
	Name, if you are not office USE ON Payment Amount \$250.00	he applicant's agent, must sign the application.  In what capacity are you signing if y are not the applicant  by the applicant  Date  LY:  Receipt Number:	/ou	
	Name, if you are not office USE ON Payment Amount	In what capacity are you signing if y are not the applicant  bt the applicant  Date  LY:	/ou	
	Name, if you are not of the second of the se	In what capacity are you signing if y are not the applicant  but the applicant  Date  LY:  Receipt Number:  Assessment Number:	/ou	
	Name, if you are not office USE ON Payment Amount \$250.00	he applicant's agent, must sign the application.  In what capacity are you signing if y are not the applicant  by the applicant  Date  LY:  Receipt Number:	/ou	
	Name, if you are not of the second of the se	In what capacity are you signing if y are not the applicant  but the applicant  Date  LY:  Receipt Number:  Assessment Number:	/ou	
	Name, if you are not of the second of the se	In what capacity are you signing if y are not the applicant  but the applicant  Date  LY:  Receipt Number:  Assessment Number:	/ou	
	Name, if you are not some state of inspection  The applicant, or to signature  Signature  Name, if you are not state of inspection	In what capacity are you signing if y are not the applicant  but the applicant  Date  LY:  Receipt Number:  Assessment Number:	/ou	
	Name, if you are not some state of inspection  The applicant, or to signature  Signature  Name, if you are not state of inspection	In what capacity are you signing if y are not the applicant  but the applicant  Date  LY:  Receipt Number:  Assessment Number:	/ou	