

REQUEST FOR INFORMATION FORM 2020/21

ABN: 30 308 161 484 | PO Box 906, Moama NSW 2731
1300 087 004 | admin@murrayriver.nsw.gov.au

OFFICE USE ONLY		Application No:		Receipt Date:		
Fee Paid:		Receipt No:				
Request for Property Information (125)	\$30-	Home Warranty Insurance (copy)				
DA/CDC/CC Application Form (copy)		Plans (copy)				
DA/CDC/CC Determination (copy)		Other (please describe information you would like to obtain in additional information below (copy) <small>(written consent required subject to copyright)</small>)				
Final Occupation Certificate (copy)		Works as Executed Plan (710)				\$41.90
Building Certificate Consent (copy)		Private Sanitary Drainage Plan (710) <small>(if available)</small>				

NOTE: If you require a copy of documents, including plans, which are subject to Copyright, a copy will not be provided unless the Copyright owner has given consent in writing. View only access to documents may be provided.

SITE DETAILS

Assessment No:		Property Name:			
Unit No./RAN	Street No:	Street:			
Town:		Parish:			
Lot(s):	Section:	DP/SP:			

OWNER DETAILS

Full Name:	
Address:	Postcode:

APPLICANT DETAILS

Applicant Name:	
Postal Address:	Postcode:
Phone:	Mobile:
Email:	
Reference:	Signature:

ADDITIONAL INFORMATION