

BLAYNEY SHIRE COUNCIL SECTION 603 CERTIFICATE

Telephone (02) 6368 2104 ABN 47 619 651 511

IMPORTANT				OFFICE USE ONLY		
Complete all parts requested				OFFICE OSE ONET		
Insufficient information may result in the return			rn of this fo	orm	Date Received	Receipt No
TO:	Blayney Shire Council PO Box 62 BLAYNEY NSW 2799				Fee \$95.00	Urgency Fee \$76.00
FROM:	1 (A II (I E II A I			SS		
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APPLICANT'S REF	ERENCE					
APPLICANT'S EMAIL						
SETTLEMENT DA	TE					
DI FACE INDICATE IF VOLUMOUI DI IIVE TUE CERTIFICATE TO RECOLUE CATER OF STANIES						
PLEASE INDICATE IF YOU WOULD LIKE THE CERTIFICATE TO BE COLLECTED OR EMAILED						
PROPERTY LOCATION						
PARISH						
COUNTY						
AREA (HA)						
STREET/ROAD No.						
STREET/ROAD NAME						
LOCALITY (suburb/town/village/district)						
COUNCIL'S ASSESSMENT No						
SECTION No.						
PORTION No.						
LOT No (s)						
DEPOSITED PLAN NO.						
PROPRIETOR'S FULL NAME & ADDRESS						
PURCHASER'S FULL NAME & ADDRESS						
Applicant's Signature				Acting For (Vendor,	/Purchaser)	Date
,. 5				3 ()	,	
Phone number				Fax number		