

BLAYNEY SHIRE COUNCIL SECTION 603 CERTIFICATE

Telephone (02) 6368 2104 ABN 47 619 651 511

IMPORTANT					OFFICE USE ONLY	
 Complete all parts requested Insufficient information may result in the return of 				orm	Date Received	Receipt No
	Thation may resul	it iii tile retail	11 01 11113 11	Jiii	Date Neceived	Receipt No
TO:	PO Box 62 BLAYNEY NSW 2799				Fee	Urgency Fee
				\$100.00	79.00	
FROM:				SS		_
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APPLICANT'S REF	ERENCE					
APPLICANT'S EMAIL						
SETTLEMENT DA	TE					
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
Phone number				Fax number		