PROPERTY INFORMATION INQUIRY FORM			OFFICE USE ONLY			
IMPORTANT	COMPLETE ALL PARTS AS REQUESTED INSUFFICIENT INFORMATION MAY RESULT IN THE RETURN OF THIS FORM	DATE RECEIV	ED	RECEIPT NO.		
SECTION 1				-		
TO:	Warren Shire Council	CHEQUE HEREWITH or BANK DEPOSIT PAID				
	PO Box 6	BANK DEPOS	IT DETAILS:	Warren Shire Council		
	Warren NSW 2824		BSB:	062-000		
			Acc No:	20785323		
FROM:	(RESPONSES WILL BE RETURNED TO THIS ADDRESS)					
INSERT APPLICANT'S		Certificat	te Type:	Section 10.7 (2)		
FULL NAME & ADDRESS				Section 10.7 (5)		
				Sewer Diagram		
		APPLICANTS	REFERENCE			

DCAL COUNCIL NAME				PARISH		COUNTY	
LOCALITY (TOWN/VILLAGE/DISTRICT) HO		HOUSE NUMBE	R STREET NA	AME			
REA (Sq M or HA)	NATURE OF PR	OPERTY (VACAN	NT LAND, HOUSE	/FACTORY/UNITS/FARM ET	FC)		
EGAL DESCRIPTION (Co	mplete the APPR	OPRIATE LII	NE(S) in full	to enable identifica	tion of the prop	erty)	
OT No	DEPOSIT PLAN	DEPOSIT PLAN No (DP No)		SECTION No (if applicable)		STREET PREVIOUS PORTION No (if rural)	
ORTION No						SECTION No	
LLOTMENT No	SECTION No		TOWN/VILLAGE/ESTATE NAME		NAME		
DT No	STRATA PLAN No			LOT No (OF COMMON PROPERTY)		DP No (OF COMMON PROPERTY)	
OTHER REFERENCES							
OLIO IDENTIFIER OR VOLUME FOLIO OR		OR	OLD SYSTEM DEED No/BOOK No		OR	OTHER eg CROWN TENURE No (INDICATE	
COUNCIL ACCESS or VALUER GENERAL No		WATERBOARD REF No		OTHER eg RU	OTHER eg RURAL LAND PROTECTION BOARD		
REGISTERED PROPRIETC	R'S/VENDOR DET	AILS					
REGISTERED PROPRIETOR'S FULL NAME AND ADDRESS						OCCUPIER'S NAME (IF APPLICABLE)	
VENDOR'S FULL NAME AND ADDRESS (IF SAME AS REGISTERED PROPRIETOR, WRITE "AS A				ABOVE"		PURPOSE OF INQUIRY	

Date Requested:	Telephone:	Fax:
Firm:	Contact Name:	Additional: