APPLICATION FOR CERTIFICATE UNDER SECTION 66

Local Government Act 1993

			1				
Applicants Name and Address Applicants Reference					cabonne.nsw.gc Fee: \$10 SPECIAL 2025/2026 fir	ov.au Email: 02.00 . WATER I	Cabonne Council PO Box 17 MOLONG NSW 2866 Rates Department Ph (02) 6392 3280 Fax (02) 6392 3260 council@cabonne.nsw.gov.au METER READING
<u> </u>							
PLEASE NOTE: A REFUND FEE OF \$26.00 WILL BE DEDUCTED FROM THE INITIAL FEE PRIOR TO REFUND IF CABONNE COUNCIL IS NOT THE WATER SERVICE PROVIDER. PLEASE RING PRIOR TO LODGING APPLICATION TO CHECK IF CABONNE IS THE WATER SERVICE PROVIDER.							
Property Location							
Parish	County		Locality		House No	Street Name	
Nearest Cross Street		Side of Stree	t	Frontage		Depth	Area
Nature of Property		l				l	
Legal Description							
Lot No	DP		Section No		Portion Number		
				_			
New Subdivision Supply details of the land before subdivisions ONLY where the lot is part of a recent subdivision							
Subdividers Name	Street Name		Lot	DP	Portion	Section	Area & Dimensions
Dagistared Proprieto	-la Eull Namo	• Basidant	ial Addross	_			
Registered Proprieto	r's Full Name (& Kesideni	lai Address	S 			
Proprietors Full Name and Address					Occupiers Name		
Purchasers Full Name and			Purpose of inquiry				
			1		Phone No		
Proposed Date of Settlement			I would like to receive certificate by				
			email	post	Email Addres	SS	
Applicants Signature Acting For			•		Date		