| CRMS NO. |  |
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## APPLICATION FOR PLANNING, BUILDING & SEPTIC INFORMATION REQUEST

| PERSON/ORGANISATION   | REQUESTING INFORM   | MATION                 |                       |                             |
|---|---|------------------------|-----------------------|-----------------------------|
| Name of Applicant   |   |                        |                       |                             |
| Name of Company   |   |                        |                       |                             |
| Address for Response  |   |                        |                       |                             |
| Contact Numbers: Phone:   | Fax   | ς:                     | Mobile                | :                           |
| Email 1.1351  |   |                        |                       |                             |
|   |   |                        |                       |                             |
| SITE OF ADDRESS (FOR RE   | QUEST)  |                        |                       |                             |
| Number  |   |                        |                       |                             |
| Street/Road   |   | _                      |                       |                             |
| Town  |   |                        |                       |                             |
| REQUEST TYPE: It is recommended you contact us I'ick applicable option (fees include                                | le GST)   | , to establish the lil | kelihood of any docu  | uments being available.     |
| PLANNING DEPARTMEN' ✓ ITEM  | Γ   |                        |                       | AMOUNT                      |
| Request copies of Planning Permit(s) - Supply Permit Number if known  |   |                        |                       | \$65.00                     |
|   |   |                        |                       | "                           |
| <b>Request copies of Endorsed Plans(s)</b> – Standard search fee of \$65.00 plus \$3.50 per plan A2 size and above. |   |                        |                       | \$65.00                     |
| BUILDING DEPARTMENT   | 1   |                        |                       |                             |
| Supply Permit Number if k   |   | ,                      |                       | \$65.00 + printing          |
| Request copies of Occupancy Permit (s) (with owners consent)-<br>Supply Permit Number if known                      |   |                        |                       | \$65.00 + printing          |
| Request copies of Buildi  |   | \$65.00 + printing     |                       |                             |
| Application for Building  | Information Request - Re                                  | egulation 326          |                       | \$50.70 per section         |
| HEALTH DEPARTMENT   |   |                        |                       |                             |
| Request for Septic Tank   |   | \$65.00                |                       |                             |
| APPROVAL GRANTED BY (   | OWNER (where relevant)                                    | ı                      |                       |                             |
| WNERS NAME (Print) OWNERS SIGNATUI  |   |                        |                       |                             |
| PAYMENT   |   |                        |                       |                             |
|   |   | randit and place       | e tick the box and we | e will ring you upon receir |
|   | h to pay for your request by your card details, otherwise |                        |                       |                             |

RETURN TO: Ararat Rural City Council
Planning & Building Department
PO Box 246, Ararat Vic 3377