



# REQUEST FORM COPY OF SEPTIC SYSTEM PLANS

## FORM 89

Date stamp

### Part 1 Property Details

Please provide the details of the property you require copies of septic system plans for

Lot

House No

Street Name

Suburb

### Part 2 Requested by

Name of person making request

*(if not the owner please have the owner complete Part 5 on the reverse of this form)*

Name

Daytime Contact Phone Number

Email Address

Are you the Owner of the property?

Yes

No

If no, please provide Owners Name

Signed

Date

### Part 3 Comments

Please provide details of any specific requests

Comments

### Part 4 Fees and Conditions

- If you are not the owner(s) of the property, Part 5 of this form must be completed by the current owner(s); or a signed letter from the current owner(s) must be provided granting consent for the Shire of Dardanup to release the plans to an authorised person.
- A copy of an Offer and Acceptance is NOT adequate
- Please allow five (5) working days for processing. You will be contacted when the plans are available for collection
- **A fee of \$21.00 is payable on collection of the plans**
- Please Note: The Shire has copies of most, but not ALL septic system plans (in particular old buildings)

**Part 5 Owners' Authorisation to Release Building Plans**

Owner to complete

Owner(s) Name

I/We as the current owner(s) of the property in question, hereby authorise the Shire of Dardanup to issue a copy of the septic system plans to:

Owner(s) Signature

Date

**Part 6 OFFICE USE ONLY**

Assessment No.

Licence No.

Development

Located Y / N

Notes:

Applicant Notified:

Yes

No

Name of Contact

Date

Officer Name