



Liverpool Plains Shire Council
 P.O. Box 152, QUIRINDI NSW 2343
 Email: lpssc@lpssc.nsw.gov.au
 Ph: (02) 6746 1755
 Fax: (02) 6746 3255

Subdivision Certificate Application

DA No:

Date:

Receipt:

Application made under the Environmental Planning & Assessment Act 1979 Section 109C(1)(d) – Form 13

APPLICANT DETAILS

Mr / Mrs / Ms / Miss / Dr / Co / Other

Name:

Postal Address:

Phone no (daytime): (mobile):.....

Email:..... Fax:

Signature:

OWNERS DETAILS AND CONSENT

Note: This section must be completed by ALL property owners

Name OR company name/s:

Address:

Phone no: E-mail:.....

Signature:

PROPERTY DESCRIPTION

We need this information to correctly identify the subject land. This information is shown on the rates notices, property deeds etc.

Lot: Sec: DP:

Street / RA No.: Property Name:

Road Name: Locality:

Site area: Assessment No: Valuation No:

DESCRIPTION OF SUBDIVISION APPROVED

Subdivision Boundary Adjustment

DEVELOPMENT CONSENT

Development Application No: Date of Determination:

Have ALL Conditions been complied with?: Yes No

CONSTRUCTION CERTIFICATE

Certificate No: Date of Issue:

Office Use Only

Amount:

Date paid:

Receipt no.:

Checked by: