

Authority No:....

Wiradjuri Country 158 Russell Street Private Mail Bag 17 Bathurst NSW 2795 Telephone 02 6333 6111 Facsimile 02 6331 7211 council@bathurst.nsw.gov.au www.bathurst.nsw.gov.au OFFICE USE ONLY

## APPLICATION FOR FLOOD LEVELS FORM

| Section 1                   | Applicant details   |
|-----------------------------|---|
| Contact Name:               |   |
| Company Name                | e: (if applicable)  |
| Postal address:             |   |
|                             |   |
|                             | Suburb State P/Code   |
| Email address:              | M.I.  |
| Contact Nos:<br>Signature:  | Mobile: Work Home   |
| Signature.                  | Date:   |
| Section 3                   | Property details  |
| Lot:                        | Assessment Number:  |
| Denosited Plan/             | Strata Plan:  |
| •                           | Street  |
|                             |   |
| Suburb:                     |   |
|                             |   |
| Section 4                   | Application details   |
| Prior to lodgeme            | ent and processing of this application, the APPLICANT shall provide:  |
| <ul> <li>A quota</li> </ul> | ation of assessment fee from Council's Engineering Services Department  |
| -                           |   |
| NOTE. PIEIIIIII             | nary assessment will be required to determine application fee, and may take up to 2 working days  |
|                             | FLOOD LEVELS ARE VAILD FOR ONE YEAR FROM DATE OF ISSUE  |
|                             | on this form is being collected to allow Council to process your application and/or carry out its statutory<br>All information collected will be held by Council and will only be used for the purpose for which it was<br>collected. An individual may view their personal information and may correct any errors. |
|                             |   |
| Fees                        | OFFICE USE ONLY   |
| Fee \$                      |   |
| Allocation Numb             | per: 2010.110.143 Receipt Type:   |
| Accessed by: C              | Officer's Name:   |
| Assessed by. C              | officer's Name:   |
|                             |   |
| Signature:                  |   |
| Date:                       |   |
|                             |   |
|                             |   |
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