Administration Building: 180 Mort Street Lithgow **Postal Address:** PO Box 19 Lithgow NSW 2790

Phone: (02) 63549999 **Fax**: (02) 63514259

Email:council@lithgow.nsw.gov.auWeb:www.lithgow.nsw.gov.au

NAME OF APPLICANT: _____

ABN: 59 986 092 492



CERTIFICATE UNDER 121ZP ENVIRONMENTAL & PLANNING ASSESSMENT ACT 1979

POSTAL ADDRESS:					
TELEPHONE NO:		FAX:			
APPLICANT/S REFERENCE:					
This application is made to Lith Act 1979. APPLICATION FEE IS E PLEASE TICK BOX IF A	,	Certificate of the Environme	ent and Planning A	ssessment	
PROPERTY DESCRIPTION					
DISTRICT/TOWN/VILLAGE: _					
HOUSE NO:	STREET: _				
LOT:	DP:	PORTION:			
SECTION:	PARISH:				
COUNTY:	NEAREST CROSS STREET:				
NATURE OF PROPERTY:	(Vacant Land, house, tel				
PURCHASER/S NAME:					
APPLICANT/S SIGNATURE:		DATE:		/	
PRIVACY & PERSONAL INFORMATIO By completion of this form you may be pro- the function of Council. Information provi- disclose personal information. Exempt doc	oviding Council with personal information ided to Council may be used in conjunction	n with any of Council's business opera	ations. We will take reas		
OFFICE USE ONLY					
DATE RECEIVED:/_		RECEIPT NO:			
CREATED BY:		AMOUNT PAID:	\$		
RECEIPTED BY:		DATE PAID:			
PRODUCED BY:		CERTIFICATE NO:	121ZP <u>-</u>		
CHECKED BY:		PROPERTY NO:			
MANAGER SIGNATURE:		DATE POSTED:		/	
NOTES:					

Maintained by Dept:	Finance	Effective Date: JUNE 2013	Review Date: JUNE 2014
Version: 2			