



Lithgow City Council

180 Mort Street

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LITHGOW NSW 2790

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Email: Council@lithgow.nsw.gov.au

ABN: 59 986 092 492

WOC NUMBER: _____

APPLICATION FOR WORK AT OWNERS COST PAYMENT AUTHORITY

APPLICANTS NAME: _____

ADDRESS: _____

TELEPHONE: _____ MOBILE: _____

As the applicant of this request for a Work at Owners Cost (WOC), I acknowledge that I am the person/company responsible for the payment of invoices issued for work requested and/or store items issued.

NAME: _____ SIGNATURE: _____

POSITION HELD: _____ DATE: ____/____/____

PROPERTY DETAILS

OWNERS NAME: _____

ADDRESS: _____

LOT/SECTION/DP: _____ PROPERTY NO: _____

DEVELOPER/CONTRACTOR DETAILS

COMPANY NAME: _____ NAME OF PERSON: _____

ADDRESS: _____

TELEPHONE: _____ MOBILE: _____

DESCRIPTION OF WORKS

NATURE OF WOC

(Tick appropriate box)

General

Sewerage

Water

(Complete Water Service Connection Application Overleaf)

FOR OFFICE USE ONLY

FEE PAID \$ _____

ACCOUNT NO: _____

RECEIPT NO: _____

WATER METER NO: _____

DATE: _____

PRIVACY & PERSONAL INFORMATION PROTECTION NOTICE

By completion of this form you may be providing Council with personal information. Council will collect the information only for a lawful purpose directly related to the function of Council. Information provided to Council may be used in conjunction with any of Council's business operations. We will take reasonable care not to disclose personal information. Exempt documents may come under the Government Information (Public Access) Act 2009.

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