

Health Documentation Search Request

Shire of Donnybrook Balingup



PROPERTY DETAILS

Please ensure that all details are clearly printed (if written), and all fields are completed.

Lot #:	House #:	Location #:
Street Name:		Suburb:
Owner Name:		
Email:		Phone:

APPLICANT DETAILS

Name:	
Email:	Phone:
Postal address:	

PLANS REQUIRED

Please ensure that the requested document is listed below.

(\$65 + GST FEE)

Payable on application. Please allow ten (10) working days for search to be processed.

<input type="checkbox"/> Retrieval of Health Plans	<input type="checkbox"/> Certificates
<input type="checkbox"/> Documents	<input type="checkbox"/> Other Plans

Applicant to receive plans via: Pick up Email Post

If it is your intention to use copies of these plans for a new application, please ensure that all previous date and approval stamps are removed before lodgements, and mark plans clearly with proposed additions before submission.

Payment method: In person Phone call Email Post

- Cheques payable to: Shire of Donnybrook Balingup, PO Box 94, Donnybrook, WA, 6239
- Only credit cards may be used if paying via phone call
- Please complete a Credit Card Authority Form if paying via email (Shire Officers will provide)

OWNER DECLARATION

The following must be completed by the owner.

- If the property is owned by a company, a company letterhead signed by an authorised person must be provided;
- If the property is in relation to a deceased estate, documentation supporting a person's authority to act on behalf of the deceased estate must be provided;
- The fees required to complete a Health Documentation Search Request are non-refundable;
- An estimate of costs will be provided upon receipt of this form;
- Building records will be provided to the nominated applicant;
- The quality of the documentation and building records cannot be guaranteed. They also may not be to scale or depict all existing structures and therefore may not be suitable for resubmission;
- Search timeframes are subject to extensions in exceptional circumstances, and;
- A property inspection is not included to determine the existence of unauthorised structures.

I, _____, accept and consent to the above terms and conditions.

Signature:	Date:
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OFFICE USE ONLY:

Date received:	Records Office:
Accepting Officer:	
Assessment #:	
Receipt #:	

