REQUEST FORM FOR PROPERTY DRAIN, SEWER AND WATERMAIN INFORMATION



PROPERTY AND OWNER DETAILS:				
Lot No	Plan of Subdiv	rision No	9	Street No
Street		Town/Dist	rict	
Name of Current Owner				
REQUESTED BY:				
Applicant's Name				
Postal Address				
Suburb/Town			Pos	st Code
Contact Phone No	Facsimile			
Email Address				
PREFERRED DELIVERY N	METHOD: (\$30)			
Information Required	Sewer	Water \Box		OCESSING TIME FOR PLANS.
Personal Pick Up	Fax \square	Mail \Box	Email [
ONSITE ASSET LOCATION: (\$124) NOTE: CUSTOMERS SHOULD ALLOW 3				
	Sewer	Water \Box		APPOINTMENT TIME.
INDEMNITY:				
SOUTH GIPPSLAND WASUPPLIED IS ACCURATE OWNER OR OWNER'S REIS COMMENCED.	. POSITION OF	F ASSETS SHO	OULD BE VERIF	IED ON SITE BY THE
Applicant's Signature			Date	
OFFICE USE ONLY				
METHOD OF PAYMENT				
Cash Cheque	Credit (Card \Box	Amount \$	
Card Holders Name:			. Expiry Date	: <u> /</u>
Receipt No	Date			
INFORMATION SUPPLIED	BY		Da	te