Section 603 Certificate (Rates) Application Form 23/24



| If you need help I | odaina | your form, contact us | | | Office | use only | | | | | | | | |
|---------------------|---------|-----------------------------|---|------------------------------------|---------------|--------------|------------|--|--|--|--|--|--|--|
| Email | | | | | | | 1004 | | | | | | | |
| Phone | | 434 434 | | Form I | | C000098 | | | | | | | | |
| Customer | Manl | | | Last up | | June 2023 | | | | | | | | |
| Service Centres | Town | Hall, 1 Belgrave Street | Dee Why Civic Centre, 725 Pit | | Busine | | Finance | | | | | | | |
| | | y NSW 2095 a Vale | Dee Why NSW 2099 Avalon | Application no. | | Tindrice | | | | | | | | |
| | 1 Par | k Street a Vale NSW 2103 | 59A Old Barrenjoey Avalon Beach NSW | | Receip | | | | | | | | | |
| | | | | | | | | | | | | | | |
| Privacy Protection | n Notic | e | | | | | | | | | | | | |
| Purpose of collect | tion | For Council to provide ser | rvices to the communi | ty | | | | | | | | | | |
| Intended recipients | | Northern Beaches Counc | il staff | | | | | | | | | | | |
| Supply | | If you choose not to supp | If you choose not to supply your personal information, it may result in Council being unable to provide the services you seek | | | | | | | | | | | |
| Access/Correction | n | Please contact Customer | Service on 1300 434 | 134 to access o | r correct you | r personal i | nformation | | | | | | | |
| Part 1: Appli | cant | | | | | | | | | | | | | |
| Title | | Mr Mrs (| Ms Ot | her: | | | | | | | | | | |
| First Name | | | | | Last Nam | е | | | | | | | | |
| ABN | | | | | | | | | | | | | | |
| Address | | | | | | | | | | | | | | |
| Address | | | | | Postcode | | | | | | | | | |
| Phone | | | | | Mobile | | | | | | | | | |
| Email | | | | | | | | | | | | | | |
| Your Reference | | | | | | | | | | | | | | |
| Part 2: Fees | | | | | | | | | | | | | | |
| Standard Certifica | ate | \$95 | - | Urgent Certificate (Additional) | | \$60 | | | | | | | | |
| Part 3: Prope | erty I | Details | | | | | | | | | | | | |
| Rates reference / | Proper | ty / Assessment number | | | | | | | | | | | | |
| Owner(s) of the pr | operty | | | | | | | | | | | | | |
| House Number | | | Street Name | | | | | | | | | | | |
| Suburb | | | 1 | | Postcode | | | | | | | | | |
| Lot Number | | | DP or Strata N | lumber | | | | | | | | | | |
| Applicant's Signat | ture | | | | | | | | | | | | | |

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ALL HARD COPIES TO BE DESTROYED ACCORDING TO PROCEDURES

| Credit Card Details | | | | | | | | | | | | | | | |
|-------------------------|------------|--|--|---|------|--|--|--|--|--|------------------|--|--|--|--|
| Please charge my | Mastercard | | | C | Visa | | | | | | American Express | | | | |
| Amount | \$ | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| Name as appears on card | | | | | | | | | | | | | | | |
| Card Number | | | | | | | | | | | | | | | |
| Expiry Date | | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | |
| Signature | | | | | | | | | | | | | | | |
| Daytime Phone Number | | | | | | | | | | | | | | | |
| Date | | | | , | | | | | | | | | | | |

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