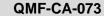
Quality Management – City Assets



Application for Road Reserve Clearance Certificate



COMPLETE AND LODGE THIS FORM AT: Administration Building - Customer Service 86 Avoca Road, Wakeley NSW 2176 OR Email: mail@fairfieldcity.nsw.gov.au

USE **ONLY**

RECEIPT NO:

CODE:	13	DA - Residential - \$275

	DA - Residential - 4275
14	DA - Industrial/Commercial - \$551

CRM	No:	
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	PROPERTY I	DETAILS	(where the work has b	een carried out)			
House No.	Street			Suburb	Postcode		
	APPLICANT/OWN	ER DETA	AILS (where the corres	spondence will be sent)			
Name: Mr / Mrs /		Contac					
		Email:					
Address:							
Addioss.	CONTRA	CTOR/BI	JILDER DETAILS	(mandatory)			
Company:			Contact No:				
Name:			Email:				
Licence No.:							
Address:							
DEVE	ELOPMENT DETAILS		DESC	RIPTION OF BUILDING WORKS			
Approved	d DA						
—	/			· · · · · · · · · · · · · · · · · · ·			
()	provide DA number)						
Please tick one of	the following:						
Residentia	al						
Industrial Commerci	ial						
	GNED, HAVE READ AND UNDERST						
	on by Council reveals that works ne						
	ifications and designs, the applicar applicant's expense. If the works are						
	& charges and charge the applicant				make the repairs at		
	If works are required or unsatisfactory and more than one inspection is required, a further fee is required for each subsequent						
-	inspection. Additional fees shall be paid prior to each inspection taking place. Please allow ten (10) business days for this application to be processed.						
OWNERS SIGN	NATURE (mandatory):		CONTRA	CTOR/BUILDER SIGNATURE:			
	DATE:			DATE:			
CODE:							
For DA Inspection I	Fee:						
OFFICE DAT	ΓE:						