

# Cloncurry Shire Council

FRM - WES7125-17

### COMMUNITY MANAGEMENT STATEMENT (STRATA TITLE)

*Information Privacy Act 2009* Cloncurry Shire Council is collecting your personal information in accordance with the *Local Government Act 2009*. The information collected on this form will be accessed by authorised Council officers or any other relevant State Government departments for the purpose of approving this application and ensuring Council records are accurate. Your information will not be accessed by any other person or agency unless you have given us permission or we are required to do so by law.

#### **Authorising Provisions:**

Body Corporate and Community Management Act 1997

SECTION 1: PROPERTY DETAILS (please print)							
Certificate of title	Volume	Folio					
Lot on survey							
Strata plan number	Folio	Land being subdivided applicable)		Folio			
Street		Street no			Shop no		
Suburb			Postcod	e			
Current details of building	Class(es)	Use					
	Class(es)	Use					
<b>Description of building</b>							

SECTION 2: OWNERS DETAILS	
Name	
Address	
Postal Address	
Suburb	Postcode
Phone no. (day)	Mobile no
Email	
Owners signature*	

## \*Property owners consent

If the applicant is not the property owner of the site, the property owner's consent must be signed in one of the following ways:

- If the sole property owner, by legal authorisation by that person
- If joint property owner's, by legal authorisation of both owners
- If the property owner is a body corporate or organisation, by affixing the seal
- In any other case by duly authorised agent or representative of the owner, and attaching a copy of the legal authorisation



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SECTION 3: APPLI	CANTS DETAII	S (if differe	ent to owne	er)					
Name									
Address									
Postal Address					<u> </u>				
Suburb					Postcode				
Phone no. (day)					Mobile no	0			
Email									
SECTION 4: CHEC	KLIST								
Before submitting the below outlines what y								on. T	he checklis
☐ Application –	Strata Title								
Annexes Shee	et								
Strata/Survey	– Strata Plan								
Correct fee en	nclosed								
SECTION 5: DECL		GNATURE							
Applicant's full nam									
Applicant's signatur	e			I	<b>Date</b>	,	/ /		
SECTION 6: APPLI	CATION LODG	EEMENT							
Applications may be	odged as follows	:							
By email:	council@clone	urry ald gov	all – scann	ed conv w	ith sionature	es only	7		
By post:	Mail to Cloncu				_	•			
By fax:	(07) 47 421 71	•	, 1 0 1	, , ,	31,001111	Ų	.02.		
Pay in person:	At Cloncurry S		Administr	ation Cent	re,				
7 1	38-46 Daintree				,				
Enquires phone:	(07) 47 424 10	0							
	<b>T 3</b> 7								
COUNCIL USE ON Name				1	Date receive	od.			
Signature					Date receive	eu.			
Reference number									
Amount paid									
Receipt no									