

	<h1>APPLICATION FOR LEGAL POINT OF DISCHARGE INFORMATION</h1>
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In accordance with the Building Act 1993 and the Building Regulations 2018: Regulation 133(2)

APPLICANT DETAILS	
Name:	
Company:	
Address:	
Suburb:	Postcode:
Telephone:	Email Address:

PROPERTY DETAILS (where the information is required for)	
Street Address:	
Suburb:	
Lot Number:	Plan of Subdivision:

SUPPORTING DOCUMENTS	
A copy of the Land Title. * Refer notes below.	<input type="checkbox"/>
Payment of \$238.20 (no GST applicable) upon submission of this application.	<input type="checkbox"/>

IMPORTANT INFORMATION

FEES:

The Legal Point of Discharge Information application fee is non-refundable.

LAND TITLE REQUIREMENTS:

Please ensure that you provide a Land Title **specifically** for the property address you are requesting the information for, and in the name of your client. If the Land Title has not yet been released for the specific property, Council will not have the LPD information available yet. Submission of a parent Land Title (eg. In the name of the land developer) is insufficient. In these circumstances, Council will only provide you with a generic response. You will then be required to resubmit a new application once the relevant Land Title has been issued.

The completed application form and accompanying documentation can be submitted to
mail@wyndham.vic.gov.au or posted to PO Box 197, Werribee VIC 3030

PRIVACY STATEMENT: The personal information requested on this form is being collected by Council for the purpose of this application. Your information will be stored in Council's Customer Database and used to identify you when communicating with Council and for the delivery of services and information. For further information on how your personal information is handled, visit Council's Privacy Policy at:
<https://www.wyndham.vic.gov.au/privacy-policy>



Credit Card Payment Form

TO:

WYNDHAM CITY COUNCIL – CONSENTS & PERMITS

PAYMENT FOR:

LEGAL POINT OF DISCHARGE INFORMATION APPLICATION

☐

BANKCARD

☐

MASTERCARD

☐

VISA

Card Number

EXPIRY DATE

CARD HOLDER NAME

AMOUNT

\$238.20

SIGNATURE

(I declare that the information supplied is true and correct)

DATE

CONTACT PHONE NUMBER

Wyndham City, 45 Princes Highway, Werribee

Phone: 1300 023 411

Email: mail@wyndham.vic.gov.au