

## (SD-FO-266) ADJOINING OWNER'S DETAILS

**PPIA DISCLAIMER** – The personal information provided on this form is collected by *Griffith City Council* for the purposes of processing this application by Council employees and other authorized persons. This form will be stored within Council's record management system and may be available for public access and/or disclosure under various NSW Government legislation.

Owner \_\_\_\_\_  
 Address \_\_\_\_\_  
 Town \_\_\_\_\_ Postcode \_\_\_\_\_  
 E-mail address \_\_\_\_\_  
 Phone No \_\_\_\_\_ Mobile No \_\_\_\_\_

### Required property details (neighbouring property) looking from the street

Left hand side House No \_\_\_\_\_ Street/Road \_\_\_\_\_  
 Town \_\_\_\_\_ Post Code \_\_\_\_\_

**Office Use Only**

Owner's Name \_\_\_\_\_  
 Postal Address: \_\_\_\_\_

Right hand side House No \_\_\_\_\_ Street/Road \_\_\_\_\_  
 Town \_\_\_\_\_ Post Code \_\_\_\_\_

**Office Use Only**

Owner's Name \_\_\_\_\_  
 Postal Address: \_\_\_\_\_

Back neighbour House No \_\_\_\_\_ Street/Road \_\_\_\_\_  
 Town \_\_\_\_\_ Post Code \_\_\_\_\_

**Office Use Only**

Owner's Name \_\_\_\_\_  
 Postal Address: \_\_\_\_\_

Other back neighbour House No \_\_\_\_\_ Street/Road \_\_\_\_\_  
 Town \_\_\_\_\_ Post Code \_\_\_\_\_

**Office Use Only**

Owner's Name \_\_\_\_\_  
 Postal Address: \_\_\_\_\_

Please complete page 2

## (SD-FO-266) ADJOINING OWNER'S DETAILS

I, the adjoining owner hereby request Council to provide the ownership details of the above mentioned property(s).

The information is requested to facilitate a fencing matter between my land and the adjoining land owner(s). It is requested under the *Dividing Fences Act 1991*.

The land owners' details WILL NOT be retained, copied or disseminated for unrelated purposes and will be kept secure and only used for advising and serving of fencing matters.

I acknowledge I am aware of the Information Privacy and Personal Information Protection Principles in relation to personal information.

[https://www.ipc.nsw.gov.au/sites/default/files/file\\_manager/FS-IPPs-for-public-Sept14-ACC.pdf](https://www.ipc.nsw.gov.au/sites/default/files/file_manager/FS-IPPs-for-public-Sept14-ACC.pdf).

How would you like to receive the reply

email

Collect

Post

Signature \_\_\_\_\_ Date: \_\_\_\_\_

An applicant must provide sufficient evidence of identity and place of residence (proof of ownership) in the form of any of the following:

Driver's licence

Rates Notice

Certificate of Title

Other documentation proving ownership \_\_\_\_\_

Office Use Only:

Details provided by: CSO Signature: \_\_\_\_\_