Asset Protection Permit

Office Use Only				
Trim Reference		Assessment	No.	
Building Permit No.		Receipt No.		
-				
Property details				
Lot No	Street N	Io Street Name		
Suburb		Postcode		
Applicant details				
Name				
Address				
Suburb		Postcode		
Phone/Mobile		Email		
Application Fact \$105				
Application Fee: \$185 By signing the application, I	agree that I have read	acknowledged, and accepted	all of the terms and o	onditions and
disclosures relating to this do				
Signature		Date		
Property Owner Details				
Name				
Address				
Suburb		Postcode		
Phone/Mobile		Email		
prescribed fee		onditions detailed on the rever		

Surf Coast Shire Council considers that the responsible handling of personal information is a key aspect of democratic governance, and is strongly committed to an individual's right to privacy. Council will comply with the Information Privacy Principles as set out in the Privacy and Data Protection Act 2014. The information on this form will be used for the primary purpose it was collected or any related purpose for which the individual would reasonably expect Council to use or disclose the information. The information will not be disclosed to any other party unless Council is required to do so by the law.



POST WORKS INSPECTION				
Post Works Inspection by	SCS Officer:		Date	
POST BUILDING / DEMOLITION DAMAGE: (Any damage identified for repair must be undertaken to Council's satisfaction)				
Please advise Council when you have reinstated / repaired the above damage in order for Council to undertake a final inspection.				
Payment Details				
Cash				
Cheque (chequ	e attached)			
Credit Card				
Note: Council will process credit card payments over the counter for application lodged at the Council office or, for on line applications, Council will contact the applicant to process payment over the phone				

