

Please complete this form to apply for access to information not available on Council's website. If you need help in filling out this form, please contact the Public Information Officer on (02) 4221 6111 or visit our website at [www.shellharbour.nsw.gov.au](http://www.shellharbour.nsw.gov.au)

### Applicant Details

Company (if relevant) .....

Title (Mr/Mrs/Ms)..... Family Name ..... First Name/s.....

Postal address ..... Postcode.....

Contact Number ..... Email .....

### Details of Property

Application Number/s (ie DA/BA/CC) ..... and/or Date Range.....

Unit/House Number ..... Lot No ..... DP .....

Street Name ..... Suburb .....

### Plans

**Please note: Council will not provide copies of plans unless written consent has been obtained from the owner of the copyright. Access to residential floor plans also requires written consent from the property owner.**

<p><b>Owners Consent for Residential Floor plans</b> As the owner(s) of the above property, I/we give consent to release the internal floor plans.</p> <p>Owner's Name/s .....</p> <p>Owner's Signature/s .....</p> <p>Date .....</p>	<p><b>Copyright Holder/Architect's Consent for copying plans</b> As the architect/author of the plans for the above property, I give consent for Council to provide copies of plans.</p> <p>Architect/Author's Name .....</p> <p>Company .....</p> <p>Signature .....</p> <p>Date .....</p>
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### Other Information

**Note:** Please describe the information you would like to access in enough detail to allow us to identify it. If you do not provide enough detail and describe clearly what information you seek, Council may refuse your application.

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> DA Application Form   | <input type="checkbox"/> Occupation Certificate   | <input type="checkbox"/> Building Certificate |
| <input type="checkbox"/> Conditions of Consent | <input type="checkbox"/> Construction Certificate | <input type="checkbox"/> Other .....          |
- .....
- .....
- .....

### Signature

**Note:** Please see the section on Fees & Charges overleaf that may apply to your request.

Applicant's signature ..... Date .....

Please submit completed application to:

Post: The General Manager  
Shellharbour City Council  
Locked Bag 155  
SHELLHARBOUR CITY CENTRE 2529

In Person: ADMINISTRATION CENTRE  
Level 1, Lamerton House,  
Lamerton Crescent  
Shellharbour City Centre

Fax: (02) 4221 6016

Email: records@shellharbour.nsw.gov.au

**IMPORTANT INFORMATION**

**Please Note:** In accordance with S.8 of the GIPA Act Council cannot be required to disclose information pursuant to an informal request and cannot be required to consider an informal request. Council can impose reasonable conditions with respect to the release of information and can decide by what means the information is to be released. Public access to a record may be facilitated by deleting any information if the inclusion of that information would otherwise result in there being an overriding public interest against disclosure of the record.

**Archived Files:** In processing a request for information it is sometimes necessary to retrieve files from Council's offsite storage facility. If these files are not accessed by the applicant within two weeks or if a prior arrangement has not been made to hold these files, then they will be returned to archives. If the files are required after this time a new application will need to be submitted.

**PRIVACY & PERSONAL INFORMATION PROTECTION NOTICE**

**Purpose:** The information on this form is being collected by Shellharbour City Council and supports your request for access to information. Your personal information will be used by Council staff for the purpose of determining your request. The provision of this information is voluntary; however without it Council may not be able to process your request. You may apply to Council for access to this information.

**Requests for Correction:** Requests for correction of information under the Government Information (Public Access) Act or Privacy & Personal Information Protection Act 1998, please contact the Council's Public Information Officer.

**Storage:** This completed form will be placed on a relevant file and/or will be saved on Council's main records management system.

**Customer Service Use Only**

Files requested from archives \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Files received in Customer Services from archives \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Notes .....

Reviewed by Team Leader/Senior Customer Service Officer .....

- Applicant contacted \_\_\_\_ / \_\_\_\_ / \_\_\_\_ by (Council Officer) .....
- ID sighted ..... Documents Provided .....
- Owner's written consent received .....
- Copyright holder's written consent received .....

Photocopying/CD Fees	No of pages	Cost	
A4/A3 (\$3 first page, \$2 each additional copy)			(code 52)
A4 Colour (\$3 per copy)			(code 52)
A3 Colour (\$3.50 per copy)			(code 52)
A1 Plans \$9.00			(code 58)
Plans m <sup>2</sup> \$17.00			(code 58)
Documents on CD/DVD (\$31 per disc)			(code 007)
	<b>TOTAL:</b>	\$	

Paid by  Cheque  EFT  Cash Receipt No. .... Date .....