

**The Council of the  
City of Lithgow**

180 Mort Street Lithgow NSW 2790  
Telephone (02) 63549927

Postal Address: PO Box 19 Lithgow NSW 2790 Fax: (02) 63512927

**APPLICATION FOR PLANNING CERTIFICATE**  
**SAME DAY PROCESSING**

Environmental Planning and Assessment Act 1979

NAME OF APPLICANT: .....

POSTAL ADDRESS: .....

APPLICANT'S REFERENCE: .....

TELEPHONE NO.: .....

Tick whichever applicable:

- Certificate under Section 149 (2) (\$140.00)
- Certificate under Section 149 (2) & (5) (\$200.00)

The amount of \$..... is enclosed.

**PROPERTY DESCRIPTION:**

District, Town or Village: \_\_\_\_\_

Street: \_\_\_\_\_ House No.: \_\_\_\_\_

Lot: \_\_\_\_\_ Portion: \_\_\_\_\_ Section: \_\_\_\_\_

DP: \_\_\_\_\_ Parish: \_\_\_\_\_ County: \_\_\_\_\_

Nearest Cross Street: \_\_\_\_\_

Nature of Property (whether vacant land, house, etc.): \_\_\_\_\_

(Please supply property location on site)

OWNER'S FULL NAME & ADDRESS:

\_\_\_\_\_

PURCHASER'S NAME:

\_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

=====

**OFFICE USE ONLY**

Receipt No.: \_\_\_\_\_

Amount: \$ \_\_\_\_\_

Date Paid: \_\_\_\_\_

Ref. No.: \_\_\_\_\_

149 Cert. No.: 149( ) \_\_\_\_\_

Property No.: \_\_\_\_\_