

APPLICANT INFORMATION

Applicant's Name: _____

Company Name (if applicable): _____

Client's Name / Reference (if applicable): _____

Address: _____ Postcode: _____

Ph (Business): _____ Mobile: _____ Ph (Home): _____

Fax: _____ Email: _____

Please send the completed LIM by:

- | | |
|---|--|
| <input type="checkbox"/> Mail | <input type="checkbox"/> Address as above or _____ |
| <input type="checkbox"/> Fax | <input type="checkbox"/> Number as above or _____ |
| <input type="checkbox"/> Phone to collect | <input type="checkbox"/> Number as above or _____ |

Signature: _____ Date: _____

PROPERTY INFORMATION (please complete as much as possible)

I/We (the applicant/s) hereby apply for a Land Information Memorandum in respect of the **Residential / Commercial** (choose one) property situated at:

Address: _____

Valuation Number: _____

Note: A separate application is required for each portion of land held under separate valuation references.

Owner: _____

Legal Description: Lot No: _____ DP: _____ Land Area: _____ m² _____ ha

Section: _____ Block: _____ SD: _____

PAYMENT OF FEES – Fees must be paid before this application can be processed.

Send application and fee to Central Otago District Council, PO Box 122, Alexandra.

- | | | | |
|-------------|--------------------------|----------|--|
| Residential | <input type="checkbox"/> | \$135.00 | Standard LIM (provided within 10 working days) |
| Residential | <input type="checkbox"/> | \$170.00 | Urgent LIM (provided within 5 working days) |
| Commercial | <input type="checkbox"/> | \$190.00 | Standard LIM (provided within 10 working days) |
| Commercial | <input type="checkbox"/> | \$255.00 | Urgent LIM (provided within 5 working days) |

Council reserves the right to make an additional charge where search requirements are complex or extensive.

FOR OFFICE USE

Application Received (date):	_____	LIM No:	_____ L _____
Fee Paid:	\$ _____	Debtor No:	_____
		Invoice No:	_____