## Request for Ownership Details for Fencing Purposes

## **Important Information**

Privacy Statement: All personal information will be handled in accordance with the Privacy and Data Protection Act 2014 (Vic). Information is being supplied in accordance with the Fences Amendment Act 2014 (Vic).

Property ownership information provided under the Fences Amendment Act 2014 may only be used to contact adjoining property owner(s) for the purpose of addressing a specific fencing matter and must be handled in accordance with the Privacy and Data Protection Act 2014. This information must be kept secure and must not be retained, copied, or shared for any other purpose beyond its intended use.

Telephone numbers and email addresses will not be provided. Council's involvement is limited to providing ownership information only. Council cannot not mediate or assist in fencing disputes.

For more information and advice on fencing matters, please visit: <a href="www.disputes.vic.gov.au/information-and-advice/fencing">www.disputes.vic.gov.au/information-and-advice/fencing</a>

## **Applicant Details**

Applications may only be submitted by the property of	owner or an authorised re	presentative.		
This form must be signed by the property owner and their authorised representative.				
Applicant Name/s:				
Company Name (if applicable):				
Postal address:				
Town:		Postcode:		
Phone:				
Email:				
☐ I am acting as an authorised representative/agent for the property owner requiring details  Property				
Property Owner Name/s: ☐ Same as applicant / or				
Owner 1:	Owner 2:			
Owner 1 contact phone:	Owner 2 contact phone:			
Property address:				
Town:		Postcode:		
Town:		Postcode:		

Property address of the property owner requiring neighbouring property addresses for fencing purposes



Adjoinin	g properties for whi	ch owner's	details are being requested
Property A	ddress 1:		
Property A	ddress 2:		
Property A	ddress 3:		
Declarat	tion		
	it the information being requisent to construct a boundary		ed is to contact the above property owner(s) to joining properties.
Applicant S	Signature:	•	, <u> </u>
Date:			
	the applicant to receive the ce to provide false or mislea		nation as my authorised agent. I understand that it
Property O	wner 1 Signature:	P	roperty Owner 2 Signature:
Date:		D	ate:
Office use	anlı		
Office use Date:	only		Date stamp:
CIO name:	:		
Service ce	ntre:		
Submiss	sion		
Mail	Post the completed and signed application to 'Latrobe City Council' to PO Box 264 Morwell VIC 3840.		

Mail	Post the completed and signed application to 'Latrobe City Council' to PO Box 264 Morwell VIC 3840.		
Email	Email a scanned copy of the completed and signed form to <a href="mailto:latrobe@latrobe.vic.gov.au">latrobe@latrobe.vic.gov.au</a>		
In person	Bring the completed and signed application to any of our following Service Centres and Libraries.		
	141 Commercial Road, Morwell	Monday to Friday, 9am to 5pm	
	63-65 Elgin Street, Morwell	Monday to Friday, 8.30am to 5.15pm Saturday, 9am to 12noon	
	34-38 Kay Street, Traralgon	Monday to Friday, 8.30am to 5.15pm Saturday, 9am to 12noon	
	1-29 George Street, Moe	Monday to Friday, 8.30am to 5.15pm Saturday, 9am to 12noon	
	9-11 Philip Parade, Churchill	Monday to Friday, 8.30am to 5.15pm Closed between 12noon to 1pm	