

STATUTORY PLANNING BOND & FEES RETURN FORM

PLANNING PERMIT NO. PLP/ /

SUBDIVISION NO. PSD/ /

PLAN NO. _____

STAGE NO. _____

ADDRESS OF WORKS _____

APPLICANT/OWNER (cross out whichever does not apply)

Name _____

Address _____

_____ Postcode _____

Phone (BH) _____ Email _____

PAYMENT DETAILS FOR REFUND

Name _____

Address _____

_____ Postcode _____

Phone (BH) _____ Email _____

BOND TYPE (please tick)

Landscape Bond

Street trees planted by owner maintenance bond

Other _____

DESCRIPTION OF WORKS (including Condition No.) _____

DATE WORKS COMPLETED _____

BOND AMOUNT TO BE REFUNDED _____

RECEIPT NUMBER AND PAYMENT DATE _____

OWNER/APPLICANT SIGNATURE _____

DATE _____