

**APPLICATION FORM**  
 ASSESSMENT BOOK EXTRACT

*Council may provide this information to the owner of the property concerned.*

This extract will be posted to the applicant's address

If details are suppressed from the Assessment Book, a letter will be sent to the owner of the property requested. If there is no objection from the owner within 14 days then the details will be forwarded to the applicant. However, if the owner refuses permission to release their details then no information will be provided.

| Applicant's Details |  |
|---------------------|--|
| Surname             | <input type="text"/>   |
| Given names         | <input type="text"/>   |
| Address             | <input type="text"/>   |
| Suburb              | <input type="text"/>   |
| Postcode            | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>  |
| Telephone           | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |

| Details of Property Requested  |   |
|--------------------------------|---|
| Address                        | <input type="text"/>  |
| Suburb                         | <input type="text"/>  |
| Postcode                       | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |
| Reason for information sought: | <input type="text"/>  |

Signature of applicant

Date: \_\_\_/\_\_\_/\_\_\_

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**Payment Details**

Please provide your credit card details below so that we may process the fee of \$3.30 associated with this request. A receipt for this transaction will be posted out to you along with the Assessment Book extract.

|                  |                      |                          |                      |                          |                      |                      |                      |                      |                      |
|------------------|----------------------|--------------------------|----------------------|--------------------------|----------------------|----------------------|----------------------|----------------------|----------------------|
| Please tick one: | Visa                 | <input type="checkbox"/> | MasterCard           | <input type="checkbox"/> |                      |                      |                      |                      |                      |
| Card Number      | <input type="text"/> | <input type="text"/>     | <input type="text"/> | <input type="text"/>     | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| Expiry Date      | <input type="text"/> | <input type="text"/>     | /                    | <input type="text"/>     | <input type="text"/> |                      |                      |                      |                      |

If you do not wish to provide your credit card details then you will need to come into the Civic Centre at 181 Unley Road, Unley SA 5061 to make payment (8.30am to 5pm Monday to Friday). Alternatively, you may post this form and a cheque for \$3.30 to PO Box 1, Unley SA 5061.

**CONTACT DETAILS**

Telephone: (08) 8372 5111  
Fax: (08) 8271 4886  
Email: [pobox1@unley.sa.gov.au](mailto:pobox1@unley.sa.gov.au)

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