Request for Copy of Plans / or Investigation of Permit

Attention: ***Development Services***
Rural City of Wangaratta
P.O. Box 238
Wangaratta Vic 3676

Date of Request:	**Permit Number:** Date Issued:
Type of: ✓Tick ☐ Plans-Building/Planning ☐ Permit-Planning/Building ☐ Permit-Septic (Health)	Applicants Name: ..... Address: .... Business Number/ Mobile: ..... Home Phone Number: .....
PROPERTY: *No:* *Street/Road:*	
Suburb: *Postcode:*	
PID No: *Vol:* *Plan:* *Sec:* *Parish:*	
Owner/Ratepayers Name: *Original Owner:*	
Details of request:	
Signed by applicant:……..……...Date:……	

Item	**Cost**	**Number of Copies**	**Sub Total**
Building / File Retrieval	$75.00		
Planning / Past Permits Investigation	$75.00		

A4	70c each		
A3	$1.15 each		
A4 Colour	$2.45 each		
A3 Colour	$4.60 each		
Other	$11.60 per sheet		
		Total Copies:	**Total Payable:** **$**
Office Use Only: Paid Receipt No:		**Date:**	