City of Salisbury ABN 82 615 416 895 34 Church Street PO Box 8

Salisbury SA 5108

(08) 8406 8222 city@salisbury.sa.gov.au salisbury.sa.gov.au



REQUEST FOR COPIES OF PLANS/DOCUMENTS FROM DEVELOPMENT APPLICATIONS

Fee (\$)

Search Fee

NAME:						
POSTAL ADDRE	ESS:					
			Po	ost Code:		
CONTACT NUMBER:			EMAIL:			
ADDRESS OF S	UBJECT LAND F	PLANS/DOCUM	ENTS REQUE	STED FOR:		
INFORMATION	REQUESTED (Ti	ck appropriate	boxes):		·	
Plans		Root	Roofing Layout			
☐ Elevations		☐ Strue	Structural Calculations			
☐ Tree Repor	t (tree applications o	nly) 🗖 Engi	Engineering Reports			
(Note: Document	ts may not be acc	eptable for future	e Development	Applications)		
Com	mercial / Indust	rial Search Fee	\$141 *	uest of information on completion if re		
Please note: - Sec - Co - Dec info - The * Sh	arch fee is non-refu uncil may not have tails will be emailed ormation. e fee includes up to nould excess photo	indable. the details sought within 7-10 busin 50 pages of A4 o	t. ness days, subje or A3 pages of pl ed an additional	ct to availability of hotocopies if request charge will apply.	ted.	
				subject land of th D) of the owner of		
proporty, or mar			lading prioto i		. tilo lallal	
SIGNATURE:				DATE: /	1	
	Ownership	Proof of ID	Correct info	Verifier's	Date	
	verified	sighted	requested	Name		
Code: DSS	YES / NO	YES / NO ID #	YES / NO			
NOTE: To be veri	fied by planner or	builder before fe	ees receipted			

Receipt No.

Fee Receipted by...

Date

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PROPERTY OWNER'S CONSENT

I	(print full name) being the registered
owner of the property located at (prope	ty address)
hereby consent to obtaining copies of d	ocuments requested by:
Name (insert full name):	
of (Company/Business Name):	
Contact Number:	
Email:	
Owner Signature	Date: / /