

## Rates / Property Enquiry

### Section 9.68(1) of the Local Government Act 1995 states:

*When a person, whether as principal or agent, sells or otherwise disposes of rateable land in the district of a local government, the principal or the agent, is required to give to the local government, within 21 days after the sale or disposal, written notice of the sale or disposal.*

**Please allow a minimum 7 day turnaround from the date of receipt to answer this enquiry.**

### Requesting Agent detail

Full Name: \_\_\_\_\_ RMS Ref No.: \_\_\_\_\_

Organisation name: \_\_\_\_\_ ABN: \_\_\_\_\_

Main Address: \_\_\_\_\_  
(Residential / Premises Address including Suburb and Postcode)

Postal Address: \_\_\_\_\_  
(if different from above)

Phone (H): \_\_\_\_\_ (M): \_\_\_\_\_ (W): \_\_\_\_\_

Email: \_\_\_\_\_

### Owner detail

Full Name: \_\_\_\_\_ Assessment: \_\_\_\_\_

Lot No: \_\_\_\_\_ Rural No: \_\_\_\_\_ Locality: \_\_\_\_\_

Street Address: \_\_\_\_\_

### Rates detail

Statement Account	Detail	Initial	✓ Tick box
Assessment No:	A _____	_____	<input type="checkbox"/>
Arrears to date 30/06/2023:	\$ _____		
Current to date 30/06/2024:	\$ _____		
Emergency Services Levy:	\$ _____		
Rubbish Collection Charge:	\$ _____		
Waste Transfer Station Charge:	\$ _____		
Administration/Instalment Charges:	\$ _____		
Legal Charges:	\$ _____		
Interest:	\$ _____		
<b>Sub-Total:</b>	<b>\$ _____</b>		
Pensioner Rebate:	\$ _____		
Less Paid:	\$ _____		
OTHER:	\$ _____		
<b>Total Due:</b>	<b>\$ _____</b>	<b>Date due:</b> _____	

*Note: Interest is accruing on a daily basis using simple interest at the rate of :*

% \_\_\_\_\_

*Per annum*



**Town Planning**

No.	Item	Answer	Initial	✓ Tick box
1(a)	Present zoning	Under the provisions of the current Local Planning Scheme	_____	<input type="checkbox"/>
1(b)	Applications to change zoning	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	_____			
2(a)	Resolutions passed by Council which will affect the property	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	<input type="checkbox"/>
	_____			
	_____			
	_____			
2(b)	Schemes prepared in relation to Town Planning which will affect the property	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	<input type="checkbox"/>
	_____			
	_____			
	_____			
3	Are there any building envelopes or setbacks?	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	<input type="checkbox"/>
	_____			
	_____			
	_____			
4	Is the building listed on Council's Schedule of Heritage Places?	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	<input type="checkbox"/>
	_____			
	_____			
	_____			
5	Subdivision under consideration	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	<input type="checkbox"/>
	_____			
	_____			
	_____			

## Health

No.	Item	Answer	Initial	✓ Tick box
6(a)	Any outstanding Health Orders	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	<input type="checkbox"/>
	_____			
	_____			
	_____			
6(b)	Any outstanding requisitions?	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	<input type="checkbox"/>
	_____			
	_____			
7	Is development subject to provisions of deep sewerage?	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	<input type="checkbox"/>
	_____			
	_____			
	_____			
8	Any other relevant information?	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	<input type="checkbox"/>
	_____			
	_____			

## Building

No.	Item	Answer	Initial	✓ Tick box
9(a)	Details of approved buildings on property		_____	<input type="checkbox"/>
	_____			
	_____			
9(b)	Any outstanding Orders/Requisitions by Council	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	<input type="checkbox"/>
	_____			
	_____			
9(c)	Has a building licence been issued for residential work (other than associated works) for a value in excess of \$20,000 since 01/02/1997	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	<input type="checkbox"/>

## Building

No.	Item	Answer	Initial	✓ Tick box
	Date licence issued:	_____	_____	<input type="checkbox"/>
If so:	Name of Home Indemnity Insurer:	_____	_____	<input type="checkbox"/>
	Certificate and Policy Number:	_____	_____	<input type="checkbox"/>
10	Swimming Pool Inspections: Is there a swimming pool on the property?	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	<input type="checkbox"/>
If yes:	At what date was the swimming pool inspected?	_____	_____	<input type="checkbox"/>
11(a)	Development subject to provisions of Bush Fire Management Plan?	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	<input type="checkbox"/>
11(b)	Is the property in a declared bushfire prone area?	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	<input type="checkbox"/>
11(c)	Any other relevant information?	It is the responsibility of the Vendor to ensure hard-wired Smoke Alarms are installed prior to the transfer of ownership of the property. In accordance with Building Amendment Regulations 2009.	_____	<input type="checkbox"/>

## Works

No.	Item	Answer	Initial	✓ Tick box
12	Proposals to create easements or Local government Road resumptions:	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	<input type="checkbox"/>
	_____			
	_____			
13	Any matters Council considers the purchaser should know.	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	<input type="checkbox"/>
	_____			
	_____			

## Ranger Services

No.	Item	Answer	Initial	✓ Tick box
14	Any matters that require notification	Firebreaks must be installed by 1 November and maintained until 30 April each year.	_____	<input type="checkbox"/>
	_____			
	_____			
	_____			

### Ranger Services

No.	Item	Answer	Initial	✓ Tick box
15	Outstanding infringements	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	<input type="checkbox"/>
	_____			
	_____			
	_____			

### Fire Management

No.	Item	Answer	Initial	✓ Tick box
16	Firebreak Variation <i>A firebreak variation / individual firebreak notice does not survive transfer to a new owner / occupier.</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____	<input type="checkbox"/>
17	Any other fire related matters	Fire-break order applies	_____	<input type="checkbox"/>
	_____			
	_____			
	_____			

### Important Information

Please be advised that there are various policies which may impact upon the development of this property.

Please refer to the Shire's website (<https://www.toodyay.wa.gov.au/>) for further information.

### Shire bank details

**BSB:** 633-000      **Account No:** 1104 828 098      **Ref (A):** \_\_\_\_\_  
**Paying by BPay:**      **Biller Code:** 4895      **Ref No:** \_\_\_\_\_

### OFFICE USE ONLY

EAS/Receipt Number: \_\_\_\_\_

Officer Name: \_\_\_\_\_

Signature: \_\_\_\_\_

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