

Contact Details:

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Office Location:

44 Princess Street, Macksville NSW 2447

APPLICATION FOR ACCESS TO A PUBLIC REGISTER HELD BY COUNCIL PRIVACY AND PERSONAL INFORMATION PROTECTION ACT

APPLICANT DETAILS	5:
Name:	
Address:	
Phone No:	
Email Address:	
Relationship of person being enquired about? (eg: neighbour)	
What purpose is this information being used for?	
101 ?	
Signature	of Applicant Date
Please complete as muc required with a "X" in the	th information as you can prior to submission and mark the information box below:
Property Address:	
Lot, Section, Deposi	ted Plan:
Other Information:	
The following to be com	pleted by Council:
Owners Name:	
Postal Address:	
Assessment Number:	
Council	Employee Date