

## SUBMISSION OF DOCUMENTATION

PERSONAL DETAILS						
Name				Date		
Postal Address						
State				Post Code		
Home Number				Mobile		
Email						
Subject Property		Address:				
		Lot: Plan:				
Relevant Dept/Officer						
Type of document being submitted? Please tick relevant box(es) below:						
	Town Planning – Plans/Documentation		Let	Letter		
	Land Use - Plans/Documentation		Colour Scheme			
Environmental He Plans/Document			Otl	Other (please specify)		
	Engineering – Pla	ans/Documentation				
	Building - Plans/Documentation					
Does the document relate to a current application with Council?  YES NO  If yes, please specify application/reference number						
DA:		Reference No:				
PREFERRED METHOD OF RESPONSE (if applicable)						
	Phone – Time:	AM/PM (please allow 48 hours for response)				
	Regular Post					
	Email					

**PLEASE NOTE:** To assist Council in processing your documentation in a timely manner, please complete as much of the form as possible. Council staff will aim to respond to your query within three (3) business days of receiving your documentation. However, please keep in mind due to the number of requests received daily, Council's response time may take longer that three (3) business days.

OFFICE USE ONLY					
OFFICER		POSITION			
SIGNATURE		DATE			

## PRIVACY STATEMENT

The information collected on the Form will be used by Mount Isa City Council in accordance with the processing or assessment of your application. Your personal details will not be disclosed for a purpose outside of Council protocol, except where required by legislation (including the Information Privacy Act 2009). This information may be stored in the Council database. The information collected will be retained as required by the Public Records Act 2002.