



# Local Government Enquiry

## Section 7 and Section 187 Certificate Request – 2019/2020

**To** Chief Executive  
 City of Charles Sturt  
 PO Box 1 Woodville SA 5011  
 Ph 8408 1111 Email council@charlessturt.sa.gov.au

**From** Company: \_\_\_\_\_

Postal Address: \_\_\_\_\_

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

As:  Agent  Conveyancer  
 for the:  Owner  Prospective Purchaser  Prospective Mortgagee

**Urgent**

Please issue a Certificate pursuant to Section 7 of the Land and Business (Sale and Conveyancing) Act and Regulation 12 of that Act to make the Prescribed Inquiries shown as Items numbered 23, 25, 28, 30, 33, 5, 6,7, 8, 9, 10, 24, 26, 27, 29, 32, 34 and 36 in Table 1 of Schedule 2 of the above mentioned Regulations and the Prescribed Matter shown as Building Indemnity Insurance in Table 2 of Schedule 2 of the above mentioned regulations. Information on rates and charges is also required and we request from you a Certificate pursuant to Section 187 of the Local Government Act in regard to the land.

Please issue a Certificate pursuant to Section 187 of the Local Government Act in regard to the land.

We hereby make those inquiries to you in regard to the Land described below.

**The Land** Lot No: \_\_\_\_\_ Section: \_\_\_\_\_ Plan No: \_\_\_\_\_

Certificate(s) of Title: \_\_\_\_\_

Property Address: \_\_\_\_\_

Owner(s): \_\_\_\_\_

Assessment No(s): \_\_\_\_\_

Valuer General No: \_\_\_\_\_

**Enclosed is**  A copy of both pages of the Certificate(s) of Title to the land, **and**

*Payment by:*

- Cheque
- Money Order
- Credit Card

- Payment**     \$72.25 Urgent Section 7 Certificate  
                   \$60.00 Section 7 Certificate  
                   \$35.00 Section 187 Rates Certificate

**Credit Card Payment**

We do **not accept** American Express and Diners Cards

- Visa         Mastercard

Card No    

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Name on Card: \_\_\_\_\_ Expiry Date: \_\_\_\_/\_\_\_\_

Amount Paying \$ \_\_\_\_\_ Receipt Required     Yes     No

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**Print Name:** \_\_\_\_\_

**Date:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**by or on behalf of the:**     Agent         Conveyancer