

## Owner/s Consent to Install a Water Service

The current landowner of the property is to complete this form and submit with a Water Service application

<p><b>1. Description of land</b></p> <p>The lot &amp; plan details (e.g. SP/RP) are shown on title documents or a rates notice.</p> <p>If the plan is not registered by title, provide previous lot &amp; plan details.</p>	<p>Street address (include no., street, suburb / locality &amp; postcode)</p> <div style="border: 1px solid black; height: 20px; width: 100%;"></div> <hr style="border-top: 1px dashed black;"/> <p style="text-align: right;">Postcode</p> <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>Lot &amp; Plan details</p> <div style="border: 1px solid black; padding: 2px;">Lot #</div> </div> <div style="width: 45%;"> <p>Plan</p> <div style="border: 1px solid black; padding: 2px;">SP / RP</div> </div> </div>
<p><b>2. Type of Water Service</b></p> <p>Select the type of water service you are applying for</p>	<p><b>1. Commercial / Industrial Water Service</b></p> <p> <input type="checkbox"/> 20mm           <input type="checkbox"/> 25mm           <input type="checkbox"/> 40mm           <input type="checkbox"/> 50mm           <input type="checkbox"/> 100mm           <input type="checkbox"/> 150mm+       </p> <hr/> <p><b>2. Domestic Water Service</b>      <input type="checkbox"/> 20mm</p> <hr/> <p><b>3. Rural Water Service</b>      <input type="checkbox"/> 20mm</p>
<p><b>3. Consent of Land Owner/s</b></p> <p>Completion of this section is mandatory and provides the <b>owner's consent</b> to the lodgement of this application.</p> <p>If there are multiple owners, the <b>consent of each owner</b> is required.</p> <p>NOTE: If property is owned by a company, please add full name and position (Director/Secretary).</p>	<p>I/We authorise Cairns Regional Council to install a Water Service at the above mentioned address</p> <p>First Owner:</p> <p>First Name <span style="float: right;">Last Name</span></p> <div style="border: 1px solid black; display: flex; width: 100%; height: 20px;"></div> <p>Company Name (if applicable)</p> <div style="border: 1px solid black; width: 100%; height: 20px;"></div> <p>Position (if applicable)</p> <div style="border: 1px solid black; display: flex; width: 100%; height: 20px;"></div> <p>Signature <span style="float: right;">Date</span></p> <div style="border: 1px solid black; display: flex; width: 100%; height: 20px;"></div> <p>Contact Number or Email</p> <div style="border: 1px solid black; width: 100%; height: 20px;"></div> <p>Second Owner:</p> <p>First Name <span style="float: right;">Last Name</span></p> <div style="border: 1px solid black; display: flex; width: 100%; height: 20px;"></div> <p>Company Name (if applicable)</p> <div style="border: 1px solid black; width: 100%; height: 20px;"></div> <p>Position (if applicable)</p> <div style="border: 1px solid black; display: flex; width: 100%; height: 20px;"></div> <p>Signature <span style="float: right;">Date</span></p> <div style="border: 1px solid black; display: flex; width: 100%; height: 20px;"></div> <p>Contact Number or Email</p> <div style="border: 1px solid black; width: 100%; height: 20px;"></div>