

## Preliminary Examination service DP Lodgment To be completed by Lodging Party (who is responsible for invoice payment)

LODGED BY:			Date:	/ /	
LPN: WARNING: Invoice will issue to Lodging Party entered in this panel and PAYABLE on day of issue.					
Postal address or			Surveyor'	Surveyor's Name	
NSW LRS Doc. Collection Box No.					
Contact name: Email:			PPN:	YES / NO	
LP Reference:					
Telephone:					
Mobile:					
PLAN LODGMENT FEES Effectiv	ve from 1 July 2022 subject to ann	ual review	Rate	Fee	
Plan Purpose:		and <b>\$357.</b> 3	<b>30</b> (incl. GST) <b>30</b> (incl GST) ch lot after the		
			t		
No. of sheets:					
<ul> <li>SEC 88B Instrument</li> <li>No. of Part 1 items to be created:</li> <li>No. of Dart 10 items to be released;</li> </ul>	=items				
No. of Part 1A items to be released: Building Management Statement	yes / no				
				\$	
ACCOMPANYING DOCUMENTS       Other (give details):         Administration Sheets       No. of Sheets         Letter/s					
TITLE SYSTEM       I Torrens Title       Old System       I Crown Land         Title References - please list all Title References affected by the plan       Current Title Reference/s       I Crown Land					