

**APPLICATION FOR
AMALGAMATION OF
ENCLOSURE PERMITS**

File Reference: _____

Account No: _____

I/We _____

Residential Address _____ Postal Address _____

Phone (H) _____ Phone (W) _____

1. Hereby apply to amalgamate the enclosure permits nominated below and hatched **on the attached diagram**
2. Are the owner(s) of the land to which the permits attach shown **on the attached diagram** and described below and
3. Am forwarding the prescribed fee of \$ _____ with this application

List enclosure permits and details of related land.

Permit No.	Lot/DPs	Parish/County	Land District

If insufficient space, additional permits should be listed on the attachment enclosed.

Applicant's Signature(s) _____

Date ____/____/____

To be completed by lodging agent

Lodged by _____	Address _____
Your Ref. _____	_____

Lands Office Use Only		
Application fee paid \$ _____	Receipt No _____	Date ____/____/____

