



## Pre-Examination Deposited Plan Lodgment

To be completed by Lodging Party (who is responsible for invoice payment)

<b>LODGED BY:</b>  <b>LPN:</b> <b>WARNING: Invoice will issue to Lodging Party entered in this panel and PAYABLE on day of issue.</b>  <b>Postal address or</b> DX No. or LPI Doc. Collection Box No.  <b>Contact name:</b> <b>Email:</b> <b>LP Reference:</b> <b>Telephone:</b> <b>Mobile:</b>		<b>Date:</b> /     / 201   <b>Surveyor's Name</b> .....   <b>PPN:</b> YES / NO												
<b>PLAN LODGMENT FEES</b> Effective from 1 July 2016 subject to annual review		<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:60%;">Rate</th> <th style="width:40%;">Fee</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;"> <b>\$315.70</b> (incl. GST) and  <b>\$315.70</b> (incl GST) for each lot after the first lot               </td> <td></td> </tr> </tbody> </table>	Rate	Fee	<b>\$315.70</b> (incl. GST) and <b>\$315.70</b> (incl GST) for each lot after the first lot									
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Plan Purpose: .....  First Lot No.: ..... Last Lot No.: ..... No. of sheets: .....														
<b>SEC 88B Instrument</b> • No. of Part 1 items to be created:     =..... items • No. of Part 1A items to be released:     =..... items														
<b>Building Management Statement</b> yes / no														
<b>INVOICE No:</b> .....		<b>Lodgment Fee:</b> \$.....												
<b>ACCOMPANYING DOCUMENTS</b>		Other (give details): _____ _____ _____ _____												
<table style="width:100%;"> <tr> <td style="width:33%;"> <input type="checkbox"/> Approved Signatures Form               </td> <td style="width:33%;"> <input type="checkbox"/> No. of Sheets.....               </td> <td style="width:34%;"></td> </tr> <tr> <td> <input type="checkbox"/> Letter/s               </td> <td> <input type="checkbox"/> </td> <td></td> </tr> <tr> <td> <input type="checkbox"/> Surveyor Checklist               </td> <td> <input type="checkbox"/> </td> <td></td> </tr> <tr> <td> <input type="checkbox"/> LP checklist               </td> <td> <input type="checkbox"/> </td> <td></td> </tr> </table>		<input type="checkbox"/> Approved Signatures Form	<input type="checkbox"/> No. of Sheets.....		<input type="checkbox"/> Letter/s	<input type="checkbox"/>		<input type="checkbox"/> Surveyor Checklist	<input type="checkbox"/>		<input type="checkbox"/> LP checklist	<input type="checkbox"/>		
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<b>TITLE SYSTEM</b> <input type="checkbox"/> Torrens Title <input type="checkbox"/> Old System <input type="checkbox"/> Crown Land Title References - please list all Title References affected by the plan Current Title Reference/s  _____ _____ _____ _____ _____														