Application for adjoining owner details



Use this form to request personal information to contact a neighbour about a dividing fence and/or serve a notice under Section 21 of the *Dividing Fences Act 1991*

| You | ir reques | t . | | | | | | |
|--|--|---|--|--|--------------------------|-------------------------------|---|---|
| Address of adjoining property Information requested | | | | | | | | |
| (i.e. name and/or address only) | | | | | | | | |
| For help and to return this form | | Q | Junee Shire Council, 29 Belmore Street, Junee PO Box 93, JUNEE NSW 2663 www.juneensw.gov.au | | | | | |
| 1 Your declaration | | | | | | | | |
| (full name) | | | do solemnly | | | y and sincerely declare that: | | |
| I will not use this information for any other purpose other than serving a notice under the Dividing Fences Act 1991 and I will not disclose this information to any other party I have been unable to obtain this information by any other means (e.g. directory, Title search) I am the property owner requesting my neighbour's details | | | | | | | | |
| and I make this solemn declaration conscientiously believing the same to be true, and by virtue of the provisions of the <i>Oaths Act 1900</i> . | | | | | | | | |
| Declared at (place) | | | | | | on (date) | / | / |
| Your signature | | | | | | | | |
| in the presence of an authorised witness (see section 3), who states: | | | | | | | | |
| I (full name of witness) | | | | | a (qualification) | | | |
| certify the following matters concerning the making of this statutory declaration by the person who made it: [* please tick the box that applies] | | | | | | | | |
| | I saw the face of the person, or | | | | | | | |
| | I did not see the face of the person because the person was wearing a face covering, but I am satisfied that the person had a special justification for not removing the covering. | | | | | | | |
| and | | | | | | | | |
| | I have kn | own the person for at least 12 months, or | | | | | | |
| | I have co | nfirmed the person's identity using an identification document, which was | | | | | | |
| (describe document) | | | | | | | | |
| Witness signature | | | | | Date | | / | / |
| 2 Your contact details | | | | | | | | |
| Your | full name | | | | | | | |
| Home address | | | | | | | | |
| Phone | | Home | Mobile | | | Work | | |
| Email | | | | | | | | |



3 Access to information

We are not obliged to pass on the personal contact details (i.e. email address or telephone numbers) of adjoining landowners for privacy reasons, only owner names and forwarding addresses. Please note this form **cannot** be used to request personal information relating to retaining walls.

The release of owner names and forwarding addresses is subject to the completion of the declaration on page 1 of this form in the presence of an authorised witness which includes:

- Justice of the Peace
- Solicitor
- The Registrar or Deputy Registrar-General
- Notary public

Applications are processed in order of receipt but are generally finalised within 5 working days.

Further information on dividing fences can be found at:

http://www.lawaccess.nsw.gov.au/Pages/representing/lawassist_fences/lawassist_fences.aspx

And also at:

https://www.legislation.nsw.gov.au/#/view/act/1991/72

Privacy notice

We are collecting this information to process your request. We may not be able to do so without it. Supplying this information is voluntary. We will store your personal information on our systems or in our offices, where it will be used by our staff and contractors. Other people can request access to it under the *Government Information (Public Access) Act 2009*. You can ask us to suppress your personal information from a public register and we will consider your request in line with the *Privacy and Personal Information Protection Act 1998*. Our *Privacy Management Plan* sets out how you can access or correct your personal information. Please visit www.blacktown.nsw.gov.au for a copy of the plan.