

BAL Certificate Application

INDICATIVE BUSHFIRE ATTACK LEVEL (BAL) ASSESSMENT

property

Refer to Blue Mountains City Council's payment schedule for full payment options

Lot N ^o /'s	Section N ^o .	DP N ^o .
<input type="text"/>	<input type="text"/>	<input type="text"/>
Street N ^o .	Street name	
<input type="text"/>	<input type="text"/>	
Suburb	Postcode	
<input type="text"/>	<input type="text"/>	

applicant

Name / Company name	
<input type="text"/>	
Postal address	
<input type="text"/>	
Suburb	Postcode
<input type="text"/>	<input type="text"/>
Email address	Contact telephone
<input type="text"/>	<input type="text"/>
Applicant/s signature	
<input type="text"/>	<input type="text"/>

owner

The owner/s authorisation is required to permit Council Officer's to access the property for the purpose of assessment of this application

Where the owner/s do not provide authorisation, the application may be rejected

Names / Company name	
<input type="text"/>	
<input type="text"/>	
Australian Company Number (ACN) (Provide when the owner is a company)	
<input type="text"/>	
Postal address	
<input type="text"/>	
Suburb	Postcode
<input type="text"/>	<input type="text"/>
As owner/s of the property, I / we grant permission for Council's Officers to enter the property for the purpose of assessment of this application.	
Owner/s signature	
<input type="text"/>	<input type="text"/>

checklist

The following plans must be submitted with the application:

- Site plan
 Floor plan
 Elevation plan

Office use only

Application number

Date received

BAL CERTIFICATE-
DEV021-3

further information

Blue Mountains City Council

KATOOMBA: 2-6 Civic Place
 SPRINGWOOD: 104 Macquarie Rd
 POSTAL ADDRESS:
 Locked Bag 1005, Katoomba 2780

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