

DPL Surveyor **Application**

FAMILY NAMES

POSTCODE PHONE

This application is to be completed, signed and forwarded to Land Services SA	his application is	to be completed	. signed and f	orwarded to	Land Services Sa
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E - customersupport@landservices.com.au

P - GPO Box 543 Adelaide SA 5001

LICENSED SURVEYOR NAME:

SALUTATION

EMAIL ADDRESS

ADDRESS SUBURB

Licensed Surveyor Details

Person authorised to carry out surveys in accordance with the Survey Act 1992.

GIVEN NAMES

CODE WORD (for example your mother's maiden name)					
FAX (If applicable)	LICENCE NUMBER				
PLEASE SUPPLY COPIES OF:					
[] Copy of my Surveyor's Licence herewith	[] Copy of my Driver's Licence herewith				
DECLARATION:					
I agree to operate this facility in accordance with the Terms and Conditions and acknowledge that access to Digital Plan Lodgement means that I have read and accepted those Terms and Conditions. I will advise the Land Services SA in writing, within seven (7) days, of any change in any of the particulars contained in this application.					
SIGNED	DATE				

STATE





Land Services SA ACN 618 229 815

PHONE 1800 648 176 or 8423 5000 FAX 8423 5090 EMAIL customersupport@landservices.com.au VISIT Level 9, 101 Grenfell Street, Adelaide SA 5001 POST GPO Box 543, Adelaide SA 5001

landservices.com.au