

Western Lands: Application for an extension of term for a Western Lands Lease

Use this form to request an extension of a term lease for another term of years under Clause 32 of Schedule 3 of the *Crown Land Management Act 2016*.

Contact us

For more information, please contact us at:

NSW Department of Industry—Lands & Water
PO Box 2155
DANGAR NSW 2309

Phone: 1300 886 235

Fax: 02 4925 3517

Email: western.region@crowmland.nsw.gov.au

Web: industry.nsw.gov.au/lands

Fee

\$209.00

For further information please refer to the NSW Department of Industry-Lands & Water website (industry.nsw.gov.au/lands).

Lodgement

Email the completed form to: western.region@crowmland.nsw.gov.au

Mail to: NSW Department of Industry
PO Box 2155
DANGAR NSW 2309

Include fee payment - Cheque or Money Order payable to the Department of Industry-Lands & Water

Privacy statement

The personal information you provide on this form is subject to the *Privacy & Personal Information Protection Act 1989*. It is being collected by NSW Department of Industry and will be used for purposes related to this application. NSW Department of Industry will not disclose your personal information to anybody else unless authorised by law. The provision of this information is voluntary or required to be supplied. If you choose not to provide the requested information we may not be able to process this application. You have the right to request access to, and correct details of, your personal information held by the department. Further information regarding privacy can be obtained from the NSW Department of Industry website at industry.nsw.gov.au/legal/privacy

Applicant details

In pursuance of the provisions of Clause 32 of Schedule 3 of the Crown Land Management Act 2016,

<input type="checkbox"/> I <input type="checkbox"/> We	
being the registered and beneficial holder(s) of Western Lands Lease No.	
Folio Identifier	

Hereby apply for an extension of the term of the lease for a period of years. I agree and accept that any lease granted in satisfaction of this application will be subject to the same rental, terms and conditions as currently apply, and further agree to be bound by and comply with such conditions.

Signature		Date	
Signature		Date	
Address			

Mortgagee

<input type="checkbox"/> I <input type="checkbox"/> We	
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being the holder(s) of a mortgage over the abovementioned lease hereby concur, unconditionally, in this application.

Signature		Date	
Signature		Date	
Address			

Office use only – Refer to the Receipting and Referrals Codes Document						
Business unit: <input type="checkbox"/> DO	Referral Code	WL	TRIM DOC		Account number	
Fee Paid		Receipt Number		Date		

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