



# APPLICATION FORM INSTALLATION OF A RURAL NUMBER

## FORM 85

Date stamp

### Part 1 Applicant Details

Details of person making request

Name

Daytime Contact Phone Number

Postal Address

Email Address

### Part 2 Property Details

Please complete property location details where a rural number is required

Lot

Street Name

Suburb

### Part 3 Applicant Acceptance

Please sign

I hereby request for the installation of a rural number and acknowledge that I will be invoiced for the costs involved.

Signature

Date

### Part 4 Return form to

Shire of Dardanup  
Planning Department  
1 Council Drive/PO Box 7016  
EATON WA 6232

Phone: (08) 9724 0055  
Email: [records@dardanup.wa.gov.au](mailto:records@dardanup.wa.gov.au)

### Part 5 OFFICE USE ONLY

Checklist/Procedure	Date	Signed
Application Received		
Calculate/Allocate Number		
Register Number		
Create Purchase Order (1016505) Place Order for Number		
Install Number		
Raise Invoice Request GL 1026002 (\$55 inc GST)		
Advise DOLA & Rates Department		
Send brochure to applicant		