



Office of State Revenue
NSW TREASURY
ISO 9001-Quality Certified
ABN: 77 456 270 638

Application for Clearance Certificate

NOTE:

- The **fee** for processing this application is **\$15**
- Please complete all boxed spaces and tick the appropriate boxes

Applicant's full name	
Applicant's address	
Suburb	Postcode
Phone no. ()	

Agent/client ID
Applicant's reference
Purchaser's client ID (if known)

Purpose of enquiry

1	<input type="checkbox"/> Purchase ➤ <i>If purchase, go to no. 2</i> <input type="checkbox"/> Refinance <input type="checkbox"/> Lease <input type="checkbox"/> Other (please specify)	
2	Purchaser's full name	Purchaser's residential address

Property usage

3	<input type="checkbox"/> House/Townhouse/Villa	<input type="checkbox"/> Commercial building	Is the property used as the vendor's residence? (If unknown leave blank) <input type="checkbox"/> Yes <input type="checkbox"/> No
	<input type="checkbox"/> Vacant land	<input type="checkbox"/> Car space	
	<input type="checkbox"/> Home unit	<input type="checkbox"/> Shop	
	<input type="checkbox"/> Industrial/Commercial	<input type="checkbox"/> Other (please specify)	
	<input type="checkbox"/> Farm/Rural		

Description of property (Please complete appropriate description)

4	Plan type <input type="checkbox"/> Deposited Plan <input type="checkbox"/> Strata Plan	Plan no.	Lot no.	Section no.	
5	Volume/Folio /	Book/Page no. /	Portion no./Parish /	Local Government Area	Valuation no.

New subdivisions (Where the lot is part of a recent subdivision, supply details of the land above before subdivision)

6	Subdivider's name	Street no.	Street name (before subdivision)		
7	Plan type <input type="checkbox"/> Deposited Plan <input type="checkbox"/> Strata Plan	Plan no.	Lot no.	Section no.	Valuation no.

Property address

8	Street no.	Street name			
9	Suburb			Postcode	

Vendor's/Registered proprietor's details

10	Vendor's full name	Vendor's address
11	Registered proprietor's full name (if different to vendor)	Registered proprietor's address

Land tax contact details

Phone 1300 139 816* (8.30 am – 5.00 pm)

Website www.osr.nsw.gov.au

OFFICE

Office hours: Monday – Friday, 8.30 am – 4.30 pm

Parramatta GPO Box 4042, Sydney NSW 2001
DX 456 Sydney

** Interstate clients should call (02) 9689 6200*

Help in community languages is available.

PRIVACY STATEMENT

The information you provide in this form is required by OSR to determine your application for a clearance certificate. The information may be provided to third parties with your consent or as required or permitted by law.

You may review and update any personal information held by OSR by contacting the office.

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