TRANSFER OF LAND

(Revestment for Non Payment of Rates)

DESCRIPTION OF LAND (Note 1)		EXTENT	VOLUME	FOLIO
CONSIDERATION				
Application made by Local Government for to The MINISTER FOR LOCAL GOVERNMENT				
STATE OF WESTERN AUSTR	ALIA			
REGISTERED PROPRIETOR (Note 2)				
The MINISTER FOR LOCAL GOVERNMENT in exe consideration expressed above HEREBY TRANSFE Mortgages, Leases, Tenancies, Encumbrances, Cha	RS and REVESTS THE LAND	DESCRIBED ABOVE T	O THE TRANSFI	Act 1995 for the EREE free from
Dated this	day of Year			
MINISTER FOR LOCAL GOVERNMENT SIGN HERE (Note 3) MINISTER Fo	OR LANDS SIGN HERE(Note 4)	

INSTRUCTIONS

- No alteration should be made by erasure. The words rejected should be scored through and those substituted typed or written above them, the alteration being initialled by the persons signing this document and their witnesses.
- If further space is required Additional Sheet Form B1 should be used with appropriate headings. Additional Sheets shall be numbered consecutively and bound to this document by staples along the left margin prior to execution by the parties.
- No alteration should be made by erasure. The words rejected should be scored through and those substituted typed or written above them, the alteration being initialled by the persons signing this document and their witnesses.

NOTES

1. **DESCRIPTION OF LAND**

Lot and Diagram/Plan/Strata/Survey-Strata Plan number or Location name and number to be stated.

Extent – Whole, part or balance of the land comprised in

the Certificate of Title to be stated.
The Volume and Folio or Crown Lease number, to be

2. **REGISTERED PROPRIETOR**

stated.

EXAMINED

State full name of the Registered Proprietor as shown on the Certificate of Title of the land.

3. EXECUTION CLAUSE FOR MINISTER FOR LOCAL GOVERNMENT

Signed by the Minister for local Government under Section 6.74 *Local Government Act 1995* by appropriate delegate.

EXECUTION CLAUSE FOR MINISTER FOR LANDS
 Signed by the Minister for Lands for on behalf of the
 State of Western Australia by appropriate delegate.



TRANSFER (Revestment for Non Payment of Rates)				
ADDRESS				
PHONE No.				
EMAIL				
REFERENCE No.				
ISSUING BOX No.				
PREPARED BY				
ADDRESS				
PHONE No.	EMAIL			
REFERENCE No.				
INSTRUCT IF ANY DOCUMENTS A THAN LODGING PARTY	ARE TO ISSUE TO OTHER			
TITLES, LEASES, DECLARATIONS	S ETC LODGED HEREWITH			
1	Received Items			
3	Nos.			
4				
5	 Receiving			
6				

OFFICE USE ONLY