# Statutory Declaration

# Oaths Act 1900, NSW, Ninth Schedule

# Request for Personal Information – Fencing Purposes

For access under Section 57 of the Privacy and Personal Information Protection Act 1998 to a public register held by Council.

|  |  |  |
| --- | --- | --- |
| I, the undersigned |  | , of |
|  | [name of declarant] |  |
|  |
| [residence of declarant] |
| being the owner of the property known as | Lot |  | DP |  | Assessment |  |
| request Council provide me with the name and address of the owners of the properties adjoining being; |
| Number: |  | Street: |  | Town: |  |
| Number: |  | Street: |  | Town: |  |
| Number: |  | Street: |  | Town: |  |
| Number: |  | Street: |  | Town: |  |
| for the purpose of fencing work required between our adjoining properties. |
| I declare and affirm that the personal information disclosed is to be used solely to facilitate a specific **fencing** matter and the personal information will be kept secure and will not be retained, copied or disseminated for any unrelated purposes.And I make this solemn declaration, as the matter (or matters) aforesaid, according to the law in this belief made – and subject to the punishment by law provided for any wilfully false statement in any such declaration. |
| Declared at: |  | on |  |
|  | [place] |  | [date] |
| [signature of declarant] |  |
| In the presence of an authorised witness, who states: I, |  |
|  | [name of authorised witness] |
| a, **Justice of the Peace** certify the following matters concerning the making of this statutory declaration by the person who made it: [\*cross out any text that does not apply]1. \*I saw the face of the person OR \*I did not see the face of the person because the person was wearing a face covering, but I am satisfied that the person had a special justification for not removing the covering, and
2. \*I have known the person for at least 12 months OR \*I have confirmed the person’s identity using an
 |
| identification document and the document I relied on was: | . |
|  |  |  |  | [describe identification document relied on] |
|  |  |  |  |  |
| [signature of authorised witness] |  | [date] |