



5 Tapio Street Dareton
PO Box 346 Dareton NSW 2717
(03) 5027 4953
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STATEMENT OF LIABILITIES REQUEST

Requested by

Name _____

Address _____

Email _____ Phone _____

Vendor

Name _____ WMI account _____

Property

Lot/s _____ DP/s _____

Shares/Entitlements included in sale

Number of Shares	_____	Number of Water Entitlements	_____	Number of Delivery Entitlements	_____
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Purchaser

Name _____

Phone/Email _____

Proposed settlement date _____ / _____ / _____

Office use	
Receipt number _____	Date _____
Statement issued _____	By _____