



WMR

Please return completed form to:
Orange City Council
PO Box 35
ORANGE NSW 2800
Civic Centre
Byng Street
ORANGE NSW 2800
Ph 1300 650 511
Fax 02 6393 8199
Email council@orange.nsw.gov.au

Office Use Only	
Receipt Type	155
Date	
Amount Paid	
Receipt No.	
Assess No.	

ORANGE CITY COUNCIL

WATER METER READING APPLICATION FORM

APPLICANT'S NAME: _____

APPLICANT'S ADDRESS: _____

APPLICANT'S PHONE NO: _____

APPLICANT'S FAX NO: _____

APPLICANT'S REFERENCE: _____

PROPERTY ADDRESS – (STREET & NUMBER): _____

DESCRIPTION OF PROPERTY: _____

LOT/SECTION & DP: _____

OWNER'S FULL NAME(S): _____

OWNER'S ADDRESS: _____

APPLICANT'S SIGNATURE: _____

Office Use Only			
Water Meter Number		Property Number	
Last Reading		New Reading	
Last Reading Date		New Reading Date	

The information you provide may be personal information for the purpose of the Privacy and Personal Protection Act 1998. The Supply of the information by you is voluntary. If you cannot provide or do not wish to provide the information sought, your application may be unable to be processed.
This personal information is being collected from you in order to process your application.