

Website Feedback

Council Employee or Elected Member

1. Your Contact Details

	Contact Name:			
	Address:			
	E-mail:			
	Phone Number:		Mobile:	
2.	. Name of Employee or Elected Member			
3.	Details of Request			
		_		
4.	Property Assessment Number (if applicable)			
5.	Contact			
	Would you like Council to contact you regarding your enquiry?			
	Yes			
	No			
	- 🗀			