

## OWNER CONTACT DETAILS

Please complete and return to our office via email/or fax/or post at your earliest convenience.

**Email:** info@premiumstrata.com.au **Fax:** (02) 9211 5642  
**Mail:** Premium Strata Pty Ltd: Suite 404, Level 4, 64-76 Kippax St, Surry Hills NSW 2010

### Property Details:

Strata Plan  Building Name   
Address   
Lot No  Unit No:

### Owners Details:

#### OWNER (1)

Mr  Ms  Miss  Mrs  Other

First Name   
Surname   
Mobile   
Home   
Work   
Email   
Postal Address

#### OWNER (2) (If applicable)

Mr  Ms  Miss  Mrs  Other

First Name   
Surname   
Mobile   
Home   
Work   
Email   
Postal Address

### Tenancy Details:

(If applicable)

Tenants Name   
Term of Lease  Commencement of Lease   
Mobile  Phone   
Email   
Postal Address

### Tenant Address for Service of Notices<sup>1</sup>:

1. Section 261 SSMA 2015 (NSW) permits an address for service of notices to be an Australian postal address or an electronic/email address.

Please tick ONE option only

**Email:** (preferred)

OR

**Post**

## Managing Agent Details: (If applicable)

Company Name

Phone  Fax

Email

Postal Address

## Address for Service of Notices<sup>1</sup>:

1. Section 261 SSMA 2015 (NSW) permits an address for service of notices to be an Australian postal address or an electronic/email address.

### Levies

#### Distribute to:

- The Owner
- OR
- The Managing Agent

#### Method of Distribution:

- Email (Preferred)
- OR
- Post

Please tick ONE option only

### Correspondence

All notices, agendas, minutes of meeting and all other correspondence

#### Distribute to:

- The Owner
- OR
- The Managing Agent

#### Method of Distribution:

- Email (Preferred)
- OR
- Post

Please tick ONE option only

I/we

(Insert full names)

the owner(s) of Lot  in Strata Plan No.

hereby specify and expressly consent to service of notices being sent as selected above

Signature of Owner (1)

Signature of Owner (2)