|  |  |  |  |
| --- | --- | --- | --- |
| Application for Land Information Memorandum | | | |
| It is important to note if you are considering buying or selling a property, that the Kāpiti Coast District Council will process your request for a Land Information Memorandum (LIM) within **10 working days** from when your application and payment in full has been received. | | | |
| Applicant’s details | | | |
| Applicant Name: Click here to enter text. | | | |
| Postal Address: Click here to enter text. | | | |
| Suburb: Click here to enter text. | | City: Click here to enter text. | |
| Post Code: Click here to enter text. | Applicant Email: Click here to enter text. | | |
| Preferred contact phone: Click here to enter text. | | Other phone: Click here to enter text. | |
| This LIM is required for the following property | | | |
| It is important that you have provided the correct Legal Description, Record of Title and Valuation Number to enable us to accurately identify the property. This information is available from our website: <http://eservices.kapiticoast.govt.nz/properties/search> or over the counter at our Council Service Centres. | | | |
| Location of Property: Click here to enter text. | | | |
| Legal Description: Lot (Number) Click here to enter text. DP (Number) Click here to enter text. | | | |
| Valuation Number: Click here to enter text. | | | |
| Record of Title (Number): Click here to enter text. | | | |
| Current Owner: Click here to enter text. | | | |
| If property is cross-leased, identify unit e.g. Front, Back: Click here to enter text. | | | |
| Does the property include a swimming pool or small heated pool (spa)? Yes  No  Unknown  If yes, select as applicable: Swimming pool  Spa  **Please note:** If a swimming pool or spa is selected and requires an inspection by council, there will be an additional fee payable before the release of the LIM. | | | |
| Fees 2023/24 (GST Inclusive) | | | Select one |
| Land Information Memorandum | | | $ 357.00 |
| Land Information Memorandum with Building Plans | | | $ 376.00 |

|  |  |  |
| --- | --- | --- |
| Method of payment (must be made at time of application) | | |
| Please note: If you pay by electronic payment you must include proof of electronic payment. | | |
| I have paid at a Kāpiti Coast District Council Service Centre when I delivered this application. | | |
| I have paid by electronic transfer (Council Bank Account Number: 03-0732-0306101-00) and quoted “LIM” and the property address in the reference fields(s); and  I have included proof of electronic payment with this application. | | |
| eclaration |  | |
| I note that:   * The appropriate fee must accompany this application and processing cannot start without correct payment. * It is my responsibility as the applicant to accurately identify the property for which this LIM is required. * Kāpiti Coast District Council is only able to provide information that is held within Council records. An on-site inspection is not made for the purposes of this report. * Kāpiti Coast District Council is not an agent for any other network utility (electricity or gas) and I may wish to contact these agencies direct with any queries. * My LIM will be emailed to me. | | |
| Cancellation of LIM applications   * For information about how to cancel an application and request a refund of a portion of the fee, please visit our website: [Cancel a land information memorandum (LIM) application - Kāpiti Coast District Council (kapiticoast.govt.nz)](https://www.kapiticoast.govt.nz/propertyhousingandrates/how-to-building-and-resource-consents/update/cancel-a-land-information-memorandum-lim-application/) * Refunds are paid as follows: * Same date of receipt of application - 75% of total cost * Between 1-2 working days – 50% of costs * After 2 working days - no refund will be issued | | |
| **Signature of Applicant:** | | **Date:** Click here to enter a date. |

Once completed please email your LIM application to [LIMs@kapiticoast.govt.nz](mailto:LIMs@kapiticoast.govt.nz) subject line to include – LIM Application and the property address.

|  |  |
| --- | --- |
| Office Use Only | |
| Date Received: | Receipt No: |
| Correct Payment or Proof of Payment Received:  Yes  No $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | |
| LIM No: | |