

I, Corey Emanuel JAMES hereby certify that the land comprised in this plan was surveyed by Jared William Pinkstone, Surveying Graduate, for whose work I accept responsibility, and that the plan is	Plan of Easement A	Scale: 1:250	
accurate, that the said survey was performed in accordance with the Survey and Mapping Infrastructure Act 2003 and Surveyors Act 2003 and associated Regulations and Standards and that the said survey		Format: STANDARD	
was completed on 16/05/2019. Date . 20/5/19			SP312331
		cords: NO	36312331

Land Title Act 1994 ; Land Act 1994 Form 21B Version 1		WARNING : Folded or Mutilated Plans will not be accepted. Plans may be rolled. Information may not be placed in the outer margins.					
(Dealing No.)	5. Lodged by						
	(Include address, pha	ne number, reference	e, and Lodger Code)				
1. Certificate of Registered Owners or Lessees.		6. Existing		Created			
I/We SUNSHINE COAST REGIONAL COUNCIL TRUSTEE UNDER INSTRUMENT H876149		Title Reference	Description	New Lots	Road	Secondary Interests	
		16915216	LOT 17 ON RP198758	-	-	EMT A	
(Names in full)							
★ as Registered Owners of this land agree to this plan and Land as shown hereon in accordance with Section 50 of the							
st as Lessees of this land agree to this plan.							
Signature of <b>*</b> Registered Owners <b>*</b> Lessees							
* Rule out whichever is inapplicable							
2. Planning Body Approval.							
*							
hereby approves this plan in accordance with the: % Planning Act 2016							
				9. Building		Plans only.	
				* As far as	it is pract	ical to determine, no par this plan encroaches	
				onto adjoining	lots or roo	shown on this plan	
				encroaches on	to adjoining	* lots and road	
Dated this day of			I	Cadastral Surv	eyor/Direct	or * Date	
				#delete words 10. Lodgem		3:	
#				Survey Dep		\$	
#		Lots	Orig	Lodgement		\$	
<b>.</b>		7. Orig Grant	Allocation :		ew Titles	\$	
# Insert the name of the Planning Body. % In   # Insert designation of signatory or delegation %	nsert Applicable approving legislation.	8. Passed &	Endorsed :	Photocopy Postage		\$\$	
3. Plans with Community Management Statement :	A References :	-	Y EMANUEL JAMES	TOTAL		\$	
CMS Number :	Dept File : Local Govt :	Date : 20/5 Signed : 🥰		11. Insert Plan			
Name :	Surveyor: 8541		CADASTRAL SURVEYOR	Plan Number	SP3	512331	