

**METROPOLITAN REGION SCHEME**

**Form 4**

**CLAIM FOR COMPENSATION FOR INJURIOUS AFFECTION**

TO: THE WESTERN AUSTRALIAN PLANNING COMMISSION

I, .....

OF.....

BEING THE OWNER OF THE FOLLOWING LAND:

LOT No ..... STREET .....

PLAN/DIAGRAM No ..... LOCATION No .....

CERTIFICATE OF TITLE VOLUME ..... FOLIO.....

THE NATURE OF MY INTEREST BEING .....

.....

HEREBY CLAIM THAT THE SAID LAND HAS BEEN INJURIOUSLY AFFECTED BY  
REASON OF THE FOLLOWING:

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.....

.....

AND CONSEQUENTLY I CLAIM AS COMPENSATION FOR INJURIOUS AFFECTION  
THE SUM OF \$ ..... WHICH SUM IS MADE UP AS FOLLOWS:

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I WILL PRODUCE DOCUMENTARY EVIDENCE OF MY TITLE TO THE SAID LAND  
IF AND WHEN CALLED ON TO DO SO.

Signed.....

Date.....