CUSTOMER SERVICE use only					
FEES PAID:	APPLICATION NO:				
DATE:	PAYMENT METHOD:				
RECEIPT NO:	CSO INITIALS:				
PLANNING OFFICER use only					
ACTION OFFICER:	ADVERTISING:				
DEVELOPMENT:	LAND USE:				
COMMENTS:					



APPLICATION FOR DEVELOPMENT APPROVAL LOCAL PLANNING SCHEME NO.6

PROPERTY DE	TAILS								
Lot No:	House/Street No:	Location No:		:	Diagram or Plan No:				
Certificate of Title No:			Folio:			ot Area (m ²):			
Title Encumbrances (eg, easements, restrictive covenants):									
Street S Name:					Suburb:	Suburb:			
Nearest Street As Intersection:					Assessm	Assessment No (office use):			
OWNER DETAI	LS								
Name:									
ABN (if applicable):									
Postal Address:						Post Code:			
Phone (work):	Phone (work): (mobile):						Email:		
Contact Person:									
Signature:						Date:			
Signature:						Date:			
Signature:					Date:				
The signature of the owner(s) is required on all applications. This application will not proceed without the signature of all landowners.									
APPLICANT DETAILS – contact person for all correspondence									
Name:									
Postal Address:							Post Code:		
Phone (work):	((mobile):				Email:			
Signature:						Date:			
The decision letter will be sent to the applicant PROPOSED DEVELOPMENT									
Nature of Developme	nt:			Works					
				Use					
				Works	and Use				
Description of propos	ed works and/or land use:								
Existing Building/Land	l Use:								
Approximate Cost of I	Development:				st. Date of completion:				
Is the Development for sought?	r which approval is: F	Proposed				AI	ready Commenced		