

SHIRE OF HARVEY LOCAL PLANNING SCHEME NO. 2

APPLICATION FOR DEVELOPMENT APPROVAL

Office Use only Registration No.: ____ Assessment No.: ___

Synergy No.: _

Application Type:

OWNER/S DETAILS AND CONSENT					
Name/s					
ABN (if applicable)					
Address					
Suburb		Post Code	e		
Phone Home		Mobile			
Work		Fax			
Email					
Contact Person:					
Signature:		Signature:			
Date:		Date:			
Note: The signature of the owner/s is required on all applications. This application will not proceed without that signature. For the purposes of signing this application an owner includes the persons referred to in the Planning and Development (Local Planning Schemes) Regulations 2015 Schedule 2 Clause 62(2).					

APPLICANT'S DETAILS (IF DIFFERENT FROM OWNER)						
Name/s						
Address						
Suburb			Post C	ode		
Phone Home			Mobile			
Work			Fax			
Email						
Contact Person for Correspondence:						
The information and plans provided with this application may be made available by the Shire for public						
viewing in connection with the application. \Box Yes \Box No						
Signature:				Date:		

PROPERTY DETAILS						
Lot No:	House/Street No:	Location No:				
Diagram or Plan No.	Certificate of title Vol. No:	Folio:				
Title encumbrances (e.g. easements, restrictive convenants):						
Street name		Suburb				
Nearest Street						

PROPOSED DEVELOPMENT					
Nature of Development: Uvorks Uvorks Uvorks and Use					
Is an exemption from development claimed for part of the development? \Box Yes If yes, \Box No					
is the exemption for: Works Use					
Detailed Description of proposed works and/or land use:					
Description of exemption claimed (if relevant):					
Nature of any existing buildings and/or land use:					
Approximate cost of proposed development (excluding GST):					
Estimated time of completion:					

BUSHFIRE PRONE AREA

Is the property wholly or partly located within a designated Bushfire Prone Area? □ Yes □ No

If yes, have you attached a:
BAL Assessment

- or 🗆 BAL Contour Map
- □ Bushfire Management Plan or □ Bushfire Management Statement