



**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	
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 Code	
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. <input type="checkbox"/> Yes <input type="checkbox"/> 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 covenants):     					
Street name		Suburb			
Nearest Street Intersection					

## PROPOSED DEVELOPMENT

Nature of Development:  Works  Use  Works and Use

Is an exemption from development claimed for part of the development?  Yes If yes,  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

**SHIRE OF HARVEY**  
**LOCAL PLANNING SCHEME NO. 2**  
**SUPPLEMENTARY FORM – HOME BUSINESS**

**BUSINESS DETAILS**

Type of Business	
Trading Name	
Floor Area (m <sup>2</sup> )	

**STAFF DETAILS**

Total number employed (inc. business owner)	
Number of employees who do not reside at the property	

**HOURS OF OPERATION**

	<b>From</b>	<b>To</b>		<b>From</b>	<b>To</b>
Monday			Saturday		
Tuesday			Sunday		
Wednesday					
Thursday					
Friday					

**CLIENTS / CUSTOMERS**

Number of clients or customers per day to property	
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**SIGNAGE**

Size of advertising sign proposed	m <sup>2</sup>	<input type="checkbox"/> N/A
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**STORAGE**

Location		Area m <sup>2</sup>		Items	
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**DELIVERIES**

Number per day		Size of delivery vehicle	
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**OFFICE USE ONLY**

Acceptance Officer's Initials:		Date Received:		Application No.	
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