

APPLICATION FORM



CITY OF VINCENT

APPLICATION FOR DEVELOPMENT APPROVAL FORM

Owner/s Details

Name:		ABN (if applicable):
Address:		Postcode:
Phone/Mobile:	Fax:	Email:
Contact Person for Correspondence:		
Signatures:		Date:

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 Details (if different from owner)

Name:		
Address:		Postcode:
Phone/Mobile:	Fax:	Email:
Contact Person for Correspondence:		
Signatures:		Date:

The information and plans provided with this application may be made available by the local government for public viewing in connection with the application. *(Please circle one)*

Yes

No

Property Details

Diagram/Plan No:	Vol. No:	Folio:
Location No:	Lot No:	House/Street No:
Street Name:		Suburb:
Nearest Street Intersection:	Title Encumbrances (easements restrictive covenants):	

Proposed Development

Nature of Development:	Works	Use	Works and Use
Is an exemption from development claimed for part of the development?		Yes	No
If yes, is the exemption claimed for (if relevant):		Works	Use
Description of Exemption (if relevant):			
Description of Proposed Works and/or Land Use:			
Nature of any Existing Buildings and/or Land Use:			
Estimated Time of Completion:	Approximate Development Cost:		

Office Use Only

DA Number:	Officer's Initials:	Date:
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