## SHIRE OF WYALKATCHEM



## **Application for development approval**

Owner details					
Name:					
ABN (if applicable):					
Address:					
Postcode:					
Phone:	Fax:	1 0310	Email:		
Work:	1 ax.		Litiali.		
Home:					
Mobile:					
Contact person for correspondence:					
Signature:	Date:				
Signature:	Da		<b>э</b> :		
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:	Fax:		Email:		
Work:					
Home:					
Mobile:					
Contact person for correspondence:					
The information and plans provided with this application may be made available by the local government for public viewing in connection with the application. $\Box$ Yes $\Box$ No					
Signature:		Date:			

Property details					
Lot No:	House/Street No:	Location No:			
Plan No: Diagram:	Certificate of Title Vol. No:	Folio:			
Title encumbrances (e.g. easements, restrictive covenants):  Street name:  Nearest street intersection:					
Proposed development					
Nature of development:					
☐ Use					
☐ Works and use					
Is an exemption from development claimed for part of the development?					
☐ Yes ☐ No					
If yes, is the exemption for: $\square$ Works					
□ Use					
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:					
Estimated time of completion:					
OFFICE LISE ONLY					
OFFICE USE ONLY  Acceptance Officer's initials:  Date received:					
Local government reference No:					