

*Planning and Development Act 2005*  
 Shire of Plantagenet  
 Town Planning Scheme No. 3 – Schedule 6  
**Application for development approval**

<b>Owner Details</b>		
Name:		
ABN (if applicable):		
Address: .....		
.....		Postcode: .....
Phone:	Fax:	Email:
Work: .....	.....	.....
Home: .....		
Mobile: .....		
Contact Person for Correspondence:		
Signature:		Date:
Signature:		Date
<i>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).</i>		

<b>Applicant details (if different from owner)</b>		
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. <input type="checkbox"/> Yes <input type="checkbox"/> No		
Signature:		Date:

<b>Property details</b>		
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:		

<b>Proposed development</b>	
Nature of development:	<input type="checkbox"/> Works <input type="checkbox"/> Use <input type="checkbox"/> Works and use
Is an exemption from development claimed for part of the development? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, is the exemption for: <input type="checkbox"/> Works <input type="checkbox"/> 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:	

<i>OFFICE USE ONLY</i>	
Acceptance Officer's initials:	Date received:
Local government reference No:	Fees paid: