

Administration

Cnr Gilmore Ave & Sulphur Rd, Kwinana WA 6167 | PO Box 21, Kwinana WA 6966

Hours Mon-Fri 8am-5pm (Cashier hours 8am-4pm) | **Telephone** 08 9439 0200**Facsimile** 08 9439 0222 | **TTY** 08 9419 7513 | admin@kwinana.wa.gov.au | www.kwinana.wa.gov.au

APPLICATION FOR DEVELOPMENT APPROVAL (PLANNING APPROVAL)

 Is the proposed development a small business (0-19 employees)? Yes No

 The City of Kwinana is a Small Business Friendly Council and has a range of opportunities to support local small business. Please indicate if you'd like to receive news and information about the City's small business initiatives:

OWNER DETAILS

Name	<input type="text"/>	Signature	<input type="text"/>	Date	<input type="text"/>
Name	<input type="text"/>	Signature	<input type="text"/>	Date	<input type="text"/>

 ABN (If applicable)

This application will not proceed without the signature/s of the owner/s. An owner includes the persons referred to in the Planning and Development (Local Planning Schemes) Regulations 2015, Schedule 2, clause 62(2). If more than two owners, please provide all relevant information on a separate page.

For companies, appropriate signatories include two directors; or one director and one secretary; or one director for a sole proprietorship company. By signing this application form, you declare that you are lawfully authorised to make an application for development approval in respect of the land.

Street Address	<input type="text"/>		
Suburb	<input type="text"/>	Postcode	<input type="text"/>
Contact Number	<input type="text"/>	Mobile Number	<input type="text"/>
Contact Person	<input type="text"/>	Email Address	<input type="text"/>

Please note: all correspondence will be via email where possible.

APPLICANT DETAILS (IF DIFFERENT FROM OWNER)

Name	<input type="text"/>		
Street Address	<input type="text"/>		
Suburb	<input type="text"/>	Postcode	<input type="text"/>
Contact Number	<input type="text"/>	Mobile Number	<input type="text"/>
Contact Person	<input type="text"/>	Email Address	<input type="text"/>
Signature	<input type="text"/>	Date	<input type="text"/>

 The information and plans provided with this application may be made available by the City of Kwinana for public viewing in connection with the application. Yes No

Invoice for fees to be made to (please select one) Owner Applicant Other

If Other, please advise Contact Person

Email	<input type="text"/>	Contact Number	<input type="text"/>
Postal Address	<input type="text"/>		
Suburb	<input type="text"/>	Postcode	<input type="text"/>

PROPERTY DETAILS

Lot No.	<input type="text"/>	Street No.	<input type="text"/>	Location No.	<input type="text"/>
Suburb	<input type="text"/>			Postcode	<input type="text"/>
Diagram/Plan No	<input type="text"/>	Certificate of Title Volume No.	<input type="text"/>	Folio	<input type="text"/>

Title encumbrances (e.g. easements, restrictive covenants):

If more than one lot, please provide all relevant information on a separate page.

PROPOSED DEVELOPMENT

Nature of development: *(please select all that apply)*

Works Use Works and Use

Joint Development Assessment Panel (JDAP)

Retrospective (ie. development has started)

Amendment to approval: DA

Is an exemption from development claimed for part of the development? Yes No

If yes, is the exemption for: Works Use

Description of exemption claimed (if relevant):

Nature of any existing buildings and/or land use	<input type="text"/>
Approximate cost of proposed development (excl. GST)	<input type="text"/>
Estimated time of completion	<input type="text"/>