

CDC No. _____



PO Box 2
WALCHA NSW 2354

Ph: 02 6774 2500
Fax: 02 6777 1181
Email: council@walcha.nsw.gov.au
Website: www.walcha.nsw.gov.au
ABN 24 780 320 847

APPLICATION TO MODIFY A COMPLYING DEVELOPMENT CERTIFICATE

SEPP (Exempt and Complying Development Codes) 2008

Under section 4.30 of the *Environmental Planning and Assessment Act 1979*.

SECTION A: SITE DETAILS

Street Address:

Suburb:

Lot / Portion / Section / DP:

SECTION B: APPLICANT DETAILS

Full Name:

Postal Address:

Daytime Contact Number(s):

Email:

Signature:

Date:

SECTION C: DESCRIPTION OF DEVELOPMENT

Complying Development Certificate No:

Date of Determination:

Description of development:

Total cost of development: \$

SECTION D: MODIFICATION DETAILS

Minor modification

Nature of modification and condition numbers to be modified. Include all changes and attach separate sheets if necessary:

1. _____

2. _____

3. _____

Reasons for requesting modification:

SECTION E: REGISTERED OWNERS CONSENT

As the registered owner(s) of the above property, I / we give consent to the submission of this application and authorise Council representatives to enter the site for the purpose of a site inspection and to make copies of all documents for the purpose of determining the application or providing copies to people who may be affected by the proposal.

Name:	
Signature:	Date:
Name:	
Signature:	Date:
Company Name (if applicable):	
ABN / ACN (if applicable):	
Authorised Officer Signature:	
Date:	

Disclosure of political donations and gifts

State legislation requires us to ask whether you, or any person with a financial interest in this application, made a reportable political donation or have given a gift to any local Councillor or Council employee within the last two (2) years?

No Yes

If yes, complete the Political Donation and Gifts Disclosure Statement and lodge it with this application.

If no, in signing this application you undertake to advise the Council in writing if you become aware of any person with a financial interest in this application who has made a political donation or has given a gift in the period from the date of lodgement of this application and the date of determination.

SECTION F: APPLICANT CHECKLIST

Application to modify a complying development certificate (s87) checklist		Yes	N/A	Office Use
1.	Consent from all owners	<input type="checkbox"/>		<input type="checkbox"/>
2.	Applicant's signature	<input type="checkbox"/>		<input type="checkbox"/>
3.	Proposed modification clearly and fully described on the s87 form	<input type="checkbox"/>		<input type="checkbox"/>
4.	Application form is fully complete	<input type="checkbox"/>		<input type="checkbox"/>
5.	Plans (3 sets) showing the modifications in colour	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6.	BASIX certificate	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7.	Payment of fees	<input type="checkbox"/>		<input type="checkbox"/>

SECTION G: LODGEMENT DETAILS

You can lodge the completed application by

Mail: Walcha Council
PO Box 2
WALCHA NSW 2354

In person: 2W Hamilton Street
WALCHA NSW 2354

What now: Once your application is received a Council officer may contact you to discuss your application, which may include a request for further information and / or clarification of the information provided.

For further information regarding your application please contact us:

Telephone: (02) 6774 2500

Email: council@walcha.nsw.gov.au

SECTION H: PRIVACY & PERSONAL INFORMATION PROTECTION NOTICE

Purpose of collection: For assessment of applications by the consent authority and any relevant state government agency.

Intended recipients: Council staff and approved contractors of the Walcha Council

Supply: A complying development certificate modification application (s87) is voluntary; however a completed application is required for delivery and management of all applicable development in the Walcha Council local government area.

Access / Correction: Council staff or Government Information (Public Access) Act requests.

Storage: Councils record management systems and Archives.

SECTION I: FEES (office use only)

Please contact Council for advice of fees payable:

Fee Type	Tick if fee payable	Fee
Modification of complying development certificate	<input type="checkbox"/>	\$
Other	<input type="checkbox"/>	\$
	Total fees:	\$
	Date received:	__ / __ / ____
	Receipt number:	

SECTION J: ENDORSEMENT OF RECEIPT (Office use only)

Date Received:	Accepted by:
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