

Office Use Only

Application No.:

Date Lodged: / /

Application for Planning Permit

If you need help to complete this form, read [How to complete the Application for Planning Permit form](#).

! Any material submitted with this application, including plans and personal information, will be made available for public viewing, including electronically, and copies may be made for interested parties for the purpose of enabling consideration and review as part of a planning process under the *Planning and Environment Act 1987*. If you have any concerns, please contact Council's planning department.

! Questions marked with an asterisk (*) are mandatory and must be completed.

! If the space provided on the form is insufficient, attach a separate sheet.

Clear Form

The Land **i**

① Address of the land. Complete the Street Address and one of the Formal Land Descriptions.

Street Address *

Unit No.:	St. No.: 1350	St. Name: Pound Road
Suburb/Locality: Clyde North		Postcode: 3978

Formal Land Description *

Complete either A or B.

! This information can be found on the certificate of title.

A Lot No.: 4 ☐ Lodged Plan ☐ Title Plan ☐ Plan of Subdivision No.: 438890 U

OR

B Crown Allotment No.: Section No.:

Parish/Township Name:

The Proposal

! You must give full details of your proposal and attach the information required to assess the application. Insufficient or unclear information will delay your application.

② For what use, development or other matter do you require a permit? *

If you need help about the proposal, read:
[How to Complete the Application for Planning Permit Form](#)

Subdivision and Associated Works

☒ Provide additional information on the proposal, including: plans and elevations; any information required by the planning scheme, requested by Council or outlined in a Council planning permit checklist; and if required, a description of the likely effect of the proposal.

③ Estimated cost of development for which the permit is required *

Cost \$ NIL **!** You may be required to verify this estimate.

Insert '0' if no development is proposed (eg. change of use, subdivision, removal of covenant, liquor licence)

Existing Conditions **i**

④ Describe how the land is used and developed now *

eg. vacant, three dwellings, medical centre with two practitioners, licensed restaurant with 80 seats, grazing.

Currently used for grazing purposes.

☒ Provide a plan of the existing conditions. Photos are also helpful.

Title Information **i**

⑤ Encumbrances on title *

If you need help about the title, read:

How to complete the Application for Planning Permit form

Does the proposal breach, in any way, an encumbrance on title such as a restrictive covenant, section 173 agreement or other obligation such as an easement or building envelope?

- ☐ Yes. (If 'yes' contact Council for advice on how to proceed before continuing with this application.)
- ☐ No
- ☒ Not applicable (no such encumbrance applies).

☒ Provide a full, current copy of the title for each individual parcel of land forming the subject site. (The title includes: the covering 'register search statement', the title diagram and the associated title documents, known as 'instruments', eg. restrictive covenants.)

Applicant and Owner Details **i**

⑥ Provide details of the applicant and the owner of the land.

Applicant *

The person who wants the permit.

Where the preferred contact person for the application is different from the applicant, provide the details of that person.

Please provide at least one contact phone number *

Owner *

The person or organisation who owns the land

Where the owner is different from the applicant, provide the details of that person or organisation.

Name: Title: Mr First Name: John Surname: Eisner

Organisation (if applicable): Parkworth P/L

Postal Address: Unit No.: St. No.: 13 If it is a P.O. Box, enter the details here: St. Name: Haverbach Ave

Suburb/Locality: Malvern State: Vic Postcode: 3144

Contact person's details * Same as applicant (if so, go to 'contact information') ☐

Name: Title: Mr First Name: Bernard Surname: Collins

Organisation (if applicable): Beveridge Williams & Co Pty Ltd

Postal Address: Unit No.: St. No.: 1 If it is a P.O. Box, enter the details here: St. Name: Glenside Rd

Suburb/Locality: Malvern State: Vic Postcode: 3144

Contact information

Business Phone: 9524 8888 Email: collinsb@bevwill.com.au

Mobile Phone: Fax:

Name: Title: Mr First Name: John Surname: Eisner Same as applicant ☐

Organisation (if applicable): Parkworth Pty Ltd

Postal Address: Unit No.: St. No.: 533 If it is a P.O. Box, enter the details here: St. Name: Burke Rd

Suburb/Locality: Camberwell State: Vic Postcode: 3124

Owner's Signature (Optional): Date: day / month / year

Declaration **i**

⑦ This form must be signed by the applicant *

A Remember it is against the law to provide false or misleading information, which could result in a heavy fine and cancellation of the permit.

I declare that I am the applicant; and that all the information in this application is true and correct; and the owner (if not myself) has been notified of the permit application.

Signature: [Signature] or behalf of applicant

Date: 23/08/13 day / month / year

Need help with the Application?

If you need help to complete this form, read [How to complete the Application for Planning Permit form](#)
General information about the planning process is available at www.dpcd.vic.gov.au/planning

Contact Council's planning department to discuss the specific requirements for this application and obtain a planning permit checklist. Insufficient or unclear information may delay your application.

- 8 Has there been a pre-application meeting with a Council planning officer?


☒ No ☐ Yes


Checklist

- 9 Have you:

☒ Filled in the form completely?

☐ Paid or included the application fee?

 Most applications require a fee to be paid. Contact Council to determine the appropriate fee.

 Provided all necessary supporting information and documents?

☒ A full, current copy of title information for each individual parcel of land forming the subject site

☒ A plan of existing conditions.

☒ Plans showing the layout and details of the proposal

☒ Any information required by the planning scheme, requested by council or outlined in a council planning permit checklist.

☒ If required, a description of the likely effect of the proposal (eg traffic, noise, environmental impacts).

☐ Completed the relevant Council planning permit checklist?

☒ Signed the declaration (section 7)?

Lodgement

Lodge the completed and signed form, the fee payment and all documents with:

City of Casey
PO Box 1000 Narre Warren VIC 3805
Princes Highway Narre Warren VIC 3805

Contact information:

Telephone: 61 03 9705 5200
Email: caseycc@casey.vic.gov.au
DX: 30460
Translation: 131 450

Deliver application in person, by fax, or by post:

Print Form

Make sure you deliver any required supporting information and necessary payment when you deliver this form to the above mentioned address. This is usually your local council but can sometimes be the Minister for Planning or another body.

Save Form:

Save Form To
Your Computer

You can save this application form to your computer to complete or review later or email it to others to complete relevant sections.