



# Application for Approval to Commence Development

CITY OF WANNEROO  
DISTRICT PLANNING SCHEME No.2

METROPOLITAN REGION SCHEME  
FORM 1

Owner(s) of land on which development proposed.

Surname/ or Company Name \_\_\_\_\_ Other Names \_\_\_\_\_

Address in full \_\_\_\_\_ Postcode \_\_\_\_\_

Submitted by \_\_\_\_\_ Date \_\_\_\_\_

Address for correspondence \_\_\_\_\_ Postcode \_\_\_\_\_

Phone \_\_\_\_\_ Mobile \_\_\_\_\_ Fax \_\_\_\_\_ E-mail \_\_\_\_\_

Locality of development (street, suburb, etc) \_\_\_\_\_

Titles Office description of land: Lot No. \_\_\_\_\_ Location No \_\_\_\_\_

Plan or Diagram \_\_\_\_\_ Certificate of Title Vol \_\_\_\_\_ Folio \_\_\_\_\_

Nearest road junction or intersection \_\_\_\_\_

Description of proposed development or land use \_\_\_\_\_

State nature of any existing buildings and/or land use \_\_\_\_\_

Approximate cost of proposed development (**excluding GST**) \$ \_\_\_\_\_

Estimated time of completion or commencement of use \_\_\_\_\_

" I acknowledge the City may need to copy the plans lodged in order to assess the application and by signing this form I consent to the City copying the plans in order to obtain comments from other agencies or from within the City, to display them for public comment, and for other purposes reasonably necessary to assess and determine the application."

Signed by the Owner(s)/ or Company Director(s) of the land \_\_\_\_\_ Date \_\_\_\_\_

If this application has been signed on behalf of a Company, please state the position the signee holds within the Company:

**All details must be completed.** For submission requirements see separate Applicant's Checklist.  
**Applicant provided completed 'Applicant's Checklist'.**  <Tick Box>

**The City may require further information to support the application. The applicant will be advised as soon as possible should this be the case.**

23 Dundobar Road, Wanneroo WA 6065 - Locked Bag 1, Wanneroo WA 6946

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Website [www.wanneroo.wa.gov.au](http://www.wanneroo.wa.gov.au)

## OFFICE USE ONLY

Application No. \_\_\_\_\_ Receipt No. \_\_\_\_\_

Document No. \_\_\_\_\_ File No. \_\_\_\_\_