



DAP FORM 2

Application for amendment or cancellation of a Development Assessment Panel determination

Planning and Development Act 2005

Planning and Development (Development Assessment Panels) Regulation 2011 – regulations 17 & 21

Part A: Development Application Previously Determined

DAP File No (DPLH Reference)		
Planning Scheme(s)	<i>Name of planning scheme(s) that applies to the prescribed land</i>	
Land	<i>Lot number, street name, town/suburb</i>	
Certificate of Title (provide copy)	<i>Volume Number</i>	<i>Folio</i>
	<i>Location Number</i>	<i>Plan / Diagram Number</i>
Description of development		
Existing Use	<i>Residential / Commercial / Industrial / Rural / Mixed Use /Community Housing/ Other</i>	
Proposed Amendments		
Original DAP Determination Date		

Part B: Applicant Details

(to be completed and signed by the applicant)

<ul style="list-style-type: none"> • By completing this notice, I declare that all the information provided in this application is true and correct. • I understand that the information provided in this notice and attached forming part of the development application will be made available to the public on the Development Assessment Panel and local government websites. 		
Name/Company		
Contact Person		
Address	<i>Street Number/PO Box number, street name, suburb, state, postcode</i>	
Contact Details	<i>Email</i>	<i>Phone</i>
Signature		<i>Date</i>
<p>Please note: unless otherwise requested, the DAP Secretariat will contact you via your nominated email address provided above.</p>		



Part C: Landowner Details

(to be completed and signed if landowner is different from applicant)

<ul style="list-style-type: none"> • By completing this notice, I consent to the applicant making this application on my behalf. • If there are more than two landowners, please provide all relevant information on a separate page. • Signatures must be provided by all registered proprietors or by an authorised agent as shown on the Certificate of Title. • Alternatively, a letter of consent, which is signed by all registered proprietors or by the authorised agent, can be provided. • Companies are required to provide signatures from two directors or a director and a company secretary unless the company has a sole director and either that director is also the sole company secretary, or the company does not have a company secretary. • Please note, any Certificate of Title provided MUST be within 6 months validity. 		
Company (if applicable)		
ACN/ABN (If applicable)		
Contact Details	<i>Email</i>	<i>Phone</i>
Address	<i>Street Number/PO Box number, street name, suburb, state, postcode</i>	
Name/s		
Title/s	<i>Landowner/Sole Director/Director (2 signatures required)</i>	<i>Additional Landowner/ Director/Secretary (if applicable)</i>
Signature/s		
Date		

Community Housing Provider	
Provider's Name	
Contact Details	
DAP Community Housing Provider Register Reference	

Part D: Amendment Requested

Please specify the amendments/modifications required to the original determination. [please tick one more of the following]:	
<input type="checkbox"/>	to amend the approval so as to extend the period within which any development approved must be substantially commenced;
<input type="checkbox"/>	to amend or delete any condition to which the approval is subject;
<input type="checkbox"/>	to amend an aspect of the development approved which, if amended, would not substantially change the development approved;
<input type="checkbox"/>	to cancel the approval.



Part E: Acknowledgement by local government

(to be completed and signed by a local government planning officer)

Responsible Authority	<input type="checkbox"/> Local Government <input type="checkbox"/> Dual – Local Government and Western Australian Planning Commission	
* DUAL reporting details	<i>If DUAL is selected, please provide details of relevant provision (or within covering letter)</i>	
DAP Fee	<input type="checkbox"/> \$264.00 has been paid by the applicant (<i>DAP Regulations - Schedule 1</i>)	
Statutory Timeframe (<i>regulation 12</i>)	<input type="checkbox"/> 60 days (advertising not required) <input type="checkbox"/> 90 days* (advertising required or other scheme provision)	
	<i>*If 90 days is selected, please provide details of advertising requirement or other scheme provision</i>	
LG Reference Number		
Name of Planning Officer (<i>Report Writer</i>)		
Position/Title		
Contact Details	<i>Email</i>	<i>Phone</i>
Planning Officer's Signature		<i>Date</i>

Please refer to the Development Assessment Panel's [Guidance Note: Lodging a DAP Application](#) for further information.