



Planning Department  
 City of Busselton  
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**Planning & Development (Local Planning Schemes) Regulations  
 Schedule 2 Clause 86  
 APPLICATION FOR DEVELOPMENT APPROVAL**


**OWNER DETAILS**

Name :			
ABN (if applicable) :			
Address :			
			Postcode :
Phone :	Fax :	Email :	
Work : _____	_____	_____@	
Home : _____		_____	
Mobile : _____			

Contact Person(s) for Correspondence :			
Signature : 		Date :	
Signature : 		Date :	
<p><i>The signature of the owner(s) is required on all applications. This application will not proceed without that signature. For the purposes of signing this application an owner includes the persons referred to in the Planning and Development (Local Planning Schemes) Regulations 2015 Schedule 2 Clause 62(2).</i></p>			

**APPLICANT DETAILS (if different from owner)**

Name :			
Address :			
			Postcode :
Phone :	Fax :	Email :	
Work : _____	_____	_____@	
Home : _____		_____	
Mobile : _____			

Contact Person(s) for Correspondence :			
The information and plans provided with this application may be made available by the local government for public viewing in connection with this application.		YES <input type="checkbox"/>	NO <input type="checkbox"/>
Signature : 			Date :
<b>PROPERTY DETAILS</b>			
Lot No :		House/Street No :	Location No :
Diagram or Plan No :		Certificate of Title Vol No :	Folio :
Title encumbrances (eg. easements, restrictive covenants) : _____ _____			
Street Name :		Suburb :	
Nearest Street Intersection :			
<b>PROPOSED DEVELOPMENT</b>			
Nature of Development :	Works <input type="checkbox"/> Use <input type="checkbox"/> Works and Use <input type="checkbox"/>	Is an exemption from development claimed for part of the development?  If yes, is the exemption for :	Yes <input type="checkbox"/> No <input type="checkbox"/>  Works <input type="checkbox"/> Use <input type="checkbox"/>
Description of proposed works and/or land use :			
Description of exemption claimed (if relevant) :			
Nature of any existing buildings and/or land use :			
Approximate cost of proposed development (Excl GST) :		\$	
Estimated time of completion :			
<b>OFFICE USE ONLY</b>			
Acceptance Officer's Initials :		Date Received :	
Local Government Reference Number :			