|  |  |
| --- | --- |
| **csc_primary_logo** | **Application for a Planning Permit**  *Planning and Environment Act 1987*  *Campaspe Planning Scheme* |

|  |  |
| --- | --- |
| **Privacy policy** | *The Campaspe Shire Council is committed to protecting personal information in accordance with the principles of the Victoria privacy laws.*  *The information provided will be used for the following purposes:*   * *correspond about the permit application* * *if necessary, notify affected parties who may wish to inspect your application so that they can respond* * *if necessary, forward your application to a referral authority who must also keep a register available for inspection by any person*   *The information you provide will be made available to:*   * *any person who may wish to inspect the application until the application process is concluded, including any review at VCAT* * *relevant officers at Council, anyone a party to the application process and other Government agencies or Ministers directly involved in the planning process* * *persons accessing information in accordance with the Public Records Act 1973 or the Freedom of Information Act 1982.*   *This information is being collected in accordance with the Planning and Environment Act 1987. If all requested information is not received, Council may not be able to process your application or objection.*  Do you agree  Yes  No |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | **The Land** | | | Address of the land | |  |  |  | | --- | --- | --- | | Street No: | Street Name: | | | Lot No: | On LP/PS No: | | | Suburb: | |  | | | |
| **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** |
| For what use, development or other matter do you require a permit? | |  | | --- | |  | |
| **Existing Conditions** | |
| Describe how the land is used and developed now – for example, vacant, three dwellings, medical centre with two practitioners, licensed restaurant with 80 seats, grazing. | |  | | --- | |  | |

|  |  |  |  |
| --- | --- | --- | --- |
| **Estimated Cost of Development** | | | |
| You may be required to verify this estimate. Insert ‘0’ if no development is proposed | |  | | --- | | $ | | | |
| **Title Information** | | | |
| 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 | |  | No applicable (no such encumbrance applies) | |  | | | | |
| |  |  | | --- | --- | | **Applicant details**  Provide details of the applicant. | | | The person you want council to communicate with about the application.  **Note** if the applicant is not the owner of the land, it is the responsibility of the applicant to inform the owner of the application. | |  |  | | --- | --- | | Name: | | | Organisation: | | | Postal Address: | | |  | Postcode: Click here to enter text. |  |  | | --- | | Please Indicate your preferred contact method by numbering in order of preference |  |  |  |  | | --- | --- | --- | | Contact phone: |  |  | | Mobile phone: |  |  | | Email: |  |  | | Fax: |  |  | | | **Owner details**  Provide details of the Owner. | | | | | | |
|  | | | |  |  | | --- | --- | | Name: | | | Postal Address: | | |  | Postcode: | | Email: | Phone: | | |
| **Declaration**  **This form must be signed**  **Remember** it is against the law to provide false or misleading information | | | **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.**   |  |  | | --- | --- | | **Name:** | | |  | | Signature: | |  |  |  | | --- | --- | | Date: |  | | |
| Has there been a pre-application meeting with a council planning officer? | | |  |  | | --- | --- | |  | No | |  | Yes | |  | | **If yes with whom:** | |  | | **Date:** | | | |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Check list** | |  |  | | --- | --- | |  | Filled in the form completely? | |  | Signed the Declaration | |  | **Attached** | |  | A full, current copy of title information for each individual parcel of land forming the subject site including any restrictions on title eg;covenants | |  | A plan of existing conditions | |  | Plans showing the layout and details of the proposal | |  | Any information required by the planning scheme eg: Application requirements listed in the zone or overlay for the land. | |  | If required, a description of the likely effect of the proposal (for example, traffic, noise, environmental impacts). | | | |
| **Lodgement** | | | |
| **Lodge the completed and signed form along with all required information.**  For help or more information | | Online: Internet outline  An online lodgement portal has been provided at <https://www.campaspe.vic.gov.au/Plan-build/Planning/Applying-for-a-planning-permit#section-3>  Mail:🖃  Shire of Campaspe  PO Box 35  ECHUCA VIC 3564  In Person: 🚹  If you wish to submit the application in person please call on the number below to arrange an appointment time to meet with a Planning Officer.  Telephone: 🖩 Planning Department (03) 5481 2200 and Fax: (03) 5481 2290  Email: shire@campaspe.vic.gov.au  Website: www.campaspe.vic.gov.au | |
|  | | |