

Planning Enquiries Phone: (03) 5232 9400 Email:<u>ing@colacotway.vic.gov.au</u> Web: <u>www.colacotway.vic.gov.au</u>

Office Use Only				
Application No:			Fee:	
Date Lodged:	/	/	Receipt No:	
Date Allocated:	/	/	Allocated to:	
Zone(s):			Overlays:	

Application for Extension of Time

Use this form to make an application to extend a planning permit under section 69 of the Act

Privacy notice

Information collected with this application will only be used to consider and determine the application.

Council help with the application

Contact council to discuss the specific requirements for this application if you are unsure. Insufficient or unclear information may delay your application.

1. Has there been a preapplication meeting with a council officer?

O Yes O No

If yes, with whom?:

Date

The Land

2. Address of the land

nd	Street No:	Street Name:			
	Lot No.	On Lodged Plan / Plan of Subdivision No.			
	Suburb/Locality:	Postcode:			

The extension proposal

3. Provide details of the permit being extended.

a. What permit is to be extended?

Include the permit number and what the permit allows.

b. What is the reason for the extension being required?

State the reasons why the use/development hasn't been commenced/completed within the timeframes specified on the permit.

Attached additional sheets if required.

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Contact, applicant and owner details

4. Provide details of the contact, applicant and owner of the land.

Contact

The person you want council to communicate with about the application.

Name:					
Organisation (if applicable):					
Postal address:					
Suburb/Locality:	Postcode:				
Contact phone:]				
Mobile phone:	Indicate preferred contact method				hod
Email:]	\checkmark			

Applicant

The person or organisation who wants the permit.

0	Same as co	ontact, if not	complete	below.
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Name:

Organisation (if applicable):

Postal address:

Suburb/Locality:

Owner

The person or organisation who owns the land.

O Same as contact

O Same as applicant

Where the owner is different from the applicant or contact provide the name of the person or organisation who owns the land.

Postcode:

Name:

Organisation (if applicable):

Declaration

5. This form must be signed. Complete one of A, B or C А **Owner/Applicant** Signature Remember it is against the I declare that I am the applicant and owner of the land and all the information law to provide false or Date: in this application is true and correct. misleading information, which could result in a heavy fine and cancellation of the В Signature Owner permit. I declare that I am the owner of the land and I have seen this application. Date: Applicant Signature I declare that I am the applicant and all of the information in this application is Date: true and correct. С Applicant Signature I declare that I am the applicant and: I have notified the owner . about this application; Date: And all the information in this application is true and correct.

Lodgement

Lodge the completed and signed form and all documents with:

For help or more information

Colac Otway Shire PO Box 283, COLAC VIC 3250 2-6 Rae Street, COLAC VIC 3250 Telephone: (03) 5232 9400 Email: ing@colacotway.vic.gov.au