

STATUTORY PLANNING LODGED DOCUMENTS

Please complete & attach to documents submitted at counter before transmission to Records

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FROM:

FULL NAME:	
PHONE NO:	
POSTAL ADDRESS:	
Are you the registered applicant? (please tick)	<input type="checkbox"/> Yes <input type="checkbox"/> No

TO:

RE: PLANNING PERMIT APPLICATION NO: P _____
(if applicable)

PROPERTY ADDRESS:

.....

BRIEF DESCRIPTION OF ATTACHED DOCUMENTS:

Date stamp: