

Application for Development Approval



Owner(s) Details			
Name	Julien Granich	ABN (If applicable)	
Address	97 Hammond St. Kellerberrin.		
Phone		Mobile	0417 091 900
Email	juliengranich@gmail.com		
Contact Person for Correspondence	Raymond Griffiths		
Preferred Method of Contact:	Letter <input type="checkbox"/>	Phone <input checked="" type="checkbox"/>	Email <input type="checkbox"/>
Signature	J. Grant	Date	5/7/24
Signature		Date	
<p><i>The signature of the owner(s) is required on all applications. This application will not proceed without those signatures. 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	U	ABN (If applicable)	
Address			
Phone		Mobile	
Email			
Contact Person for Correspondence			
Preferred Method of Contact:	Letter <input type="checkbox"/>	Phone <input type="checkbox"/>	Email <input type="checkbox"/>
The information and plans provided with this application may be made available by the Local Government for public viewing in connection with the application.	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Signature		Date	

Property Details			
Location	97 Hammond St	Folio	
Lot		House Number	97
Street Name	Hammond St	Suburb	
Diagram or Plan Number		Nearest Intersection	Hammond/Mitchell
Cert. of Title Vol. Number		Title encumbrances (eg: easement, restrictive covenants)	

Details of Proposed Development			
Nature of Development	Works <input type="checkbox"/>	Use <input type="checkbox"/>	Works & Use <input checked="" type="checkbox"/>
Is an exemption from development claimed for part of the development		Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
If yes, is the exemption for	Works <input type="checkbox"/>	Use <input type="checkbox"/>	
Description of proposed works and/or land use		Sea Container for tools / Equipment	
Description of exemption claimed (if relevant)			
Nature of any existing buildings and/or land use		House Residential	
Approx. cost of proposed development		3000	
Estimated time of completion		July 2025	

← OFFICE USE ONLY →

Administration Staff

Record Number	IPA24165	Date Received	
Officer Name		Officer Signature	

Application Fees	\$	Receipt Number		Date Paid	
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Town Planner

Approval	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Date	
Officer Name			Officer Signature	
Correspondence Sent	Letter <input type="checkbox"/>	Phone <input type="checkbox"/>	Email <input type="checkbox"/>	Date