

REQUEST FOR CONCURRENCE AGENCY ASSESSMENT

Contact Council if you have any specific enquiries regarding fees or how to complete this form. Type or print clearly and select boxes where applicable. Enter "n/a" if the question does not apply.

Type of Assessment Required

(tick applicable boxes -
the more information
provided will assist with
assessment)

Fee: _____

☐ Concurrence Agency Referral prior to Building Application (s271, SPA)

☐ Concurrence Referral (s285, SPA)

☐ Design & Siting (QDC)

☐ Amenity and aesthetics.

☐ Building over or near relevant infrastructure.

☐ Planning Scheme – Alternate Siting provisions

☐ Other

Supporting documentation must be provided i.e site plan, foundation plan, elevations floor plans. Where additional information is required a request will be made to the applicant.

Select as applicable.

APPLICANT DETAILS:

☐ Business

☐ Private

Applicants Name

Contact Person

Your Ref

Postal address

Locality / Town

State

Postcode

Contact phone

Contact fax

Email

APPLICANT'S SIGNATURE Date

Address

PROPERTY DETAILS:

Street No

Street

Locality / Town

State

Postcode

Real property description

Lot no.

Registered plan

Parish

Description of property: (eg. Dwelling, vacant, industrial, etc)

BUILDING APPLICATION DETAILS:

Has the building application been lodged? ☐ No ☐ Yes – Date of lodgement

Building Certifier:

Engagement Date:

Postal Address:

Phone:

Email:

OFFICE USE ONLY

Total

Receipt No

Date

/

/

Proposal Details (tick applicable boxes)	DESCRIPTION OF PROPOSED BUILDING WORKS:
	<input type="checkbox"/> New Dwelling <input type="checkbox"/> Dwelling Alteration <input type="checkbox"/> Carport/Shed <input type="checkbox"/> Commercial
	<input type="checkbox"/> Relocated building <input type="checkbox"/> Other:
	REASON FOR APPLICATION:
	<input type="checkbox"/> Front Boundary Setback <input type="checkbox"/> Rear Boundary Setback <input type="checkbox"/> Side Boundary Setback
	<input type="checkbox"/> Clearance from sewer <input type="checkbox"/> Amenity and Aesthetics <input type="checkbox"/> Other:
Proposal Details (tick applicable boxes)	INFORMATION TO BE SUBMITTED WITH APPLICATION:
	<input type="checkbox"/> Site Plan (inc. existing buildings on-site).
	<input type="checkbox"/> Building Plans (e.g. proposed floor plans, existing floor plans, elevations).
	<input type="checkbox"/> Additional details of relaxation/justification to further support your request.
	<input type="checkbox"/> Details of setbacks of buildings on adjoining properties (for request to relax setback to the street only).
	<input type="checkbox"/> Details of height of buildings on adjoining properties (for request to relax setback to the street only).
	<input type="checkbox"/> Copy of building application (including forms) lodged with certifier (only if a building application has already been lodged).
	<input type="checkbox"/> Copy of acknowledgement notice issued by the building certifier (only if a building application has already been lodged).
	<input type="checkbox"/> Photographs of the building – external & internal features (amenity & aesthetics, security assessment).
	<input type="checkbox"/> Photographs of surrounding area (amenity & aesthetic assessment).
	<input type="checkbox"/> Additional information as required by the relevant policy document (amenity & aesthetics, security assessment).
	JUSTIFICATION: Justification/Comments (written explanation required)

Section 2

Adjoining Land Owner's
Consent

Where the application to Council is for a performance decision in relation to siting within the Town Zone – Residential Precinct; Village Zone: Rural Residential Zone as a courtesy, it is requested that the proposal be shown to the owners of adjoining land. This provides them with the opportunity to submit their view of the proposal to Council.

The following forms may be used for this purpose, and attached at the time of lodging the application.

1.

Adjoining / Adjacent / Opposite Property Owner/s Comment regarding the Proposal

☐ I/We agree with the attached proposal for (Address); _____
or
☐ I/We object to the proposal.

Reason for Objection: _____

Title: **(Mr./Mrs./Ms/Miss)** Surname: _____ Given name: _____

Your Property Address:

Postal address: _____

Phone: (H): _____ (W): _____ (M): _____

Signature/s: _____ Date: ____/____/____

2.

Adjoining / Adjacent / Opposite Property Owner/s Comment regarding the Proposal

☐ I/We agree with the attached proposal for (Address); _____
or
☐ I/We object to the proposal.

Reason for Objection: _____

Title: **(Mr./Mrs./Ms/Miss)** Surname: _____ Given name: _____

Your Property Address:

Postal address: _____

Phone: (H): _____ (W): _____ (M): _____

Signature/s: _____ Date: ____/____/____
