



City of
KINGSTON

Application to amend a Planning Application currently under assessment.

Use this form to:

- Amend a current planning permit **or** current amendment application; under section 50 and section 57A of the *Planning and Environment Act 1987* and to provide the information required by regulation 16 of the *Planning and Environment Regulation 2015*.

Prescribed fee is required to be submitted with this form if advertising of your application has already taken place.

If you need help to complete this form or to discuss the specific requirements of this application please contact the Planning Department on 9580 4131. Insufficient or unclear information may delay your application.

Planning Enquiries

Phone: 9581 4131

Web: www.kingston.vic.gov.au

Email: info@kingston.vic.gov.au

Please note questions marked with an (*) are mandatory and must be completed

1. The Land

Address of the land. Complete the Street Address and one of the Formal Land Descriptions

Street Address *

Unit No.:	St No.:	St Name:
<input type="text"/>	<input type="text"/>	<input type="text"/>
Suburb:		Postcode:
<input type="text"/>		<input type="text"/>

Formal Land Description *

Complete either A or B. This information can be found on the certificate of title

A

Lot No.:

On Lodged Plan, Title Plan or Plan of Subdivision No:

OR

B

Crown Allotment No.:

Section No.:

Parish/Township Name:

2. Planning Application Details

Planning Application number? *

Planning Application No.:
KP

3. Cost of Building and works / permit fee

State the cost of works with respect to the proposed changes only. *

Costs
\$

Write 'NIL' if the cost difference is \$0.00
Write 'N/A' if the permit does not allow development
You may be required to verify this estimate.

4. The Amended Proposal

You must give full details of the amendment being applied for. Insufficient or unclear information may delay your application.

What is the amendment being applied for? *

Indicate the type of changes proposed to the plans/documents.

Why is the amendment required?

State the reasons for the change.

If the space provided is insufficient, attach a separate sheet

Details:

Reasons:

5. Title Information

Encumbrances on title?*

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
- Not applicable (no such encumbrance applies)

Council must not grant an amendment to a permit that authorises anything that would result in a breach of a registered restrictive covenant (section 61 (4) and 62 of the *Planning and Environment Act 1987*).

6. Applicant and Owner Details

Provide details of the applicant and owner of the land.

Applicant*

The person who will receive the permit.

Name:

Title:

First Name:

Surname:

Organisation:

Postal Address:

If it is a PO Box, enter the details here:

Unit No.:

St No.:

St Name:

Suburb:

State:

Postcode:

Contact*

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

Name:

Same as applicant

Title:

First Name:

Surname:

Organisation:

Postal Address:

If it is a PO Box, enter the details here:

Unit No.:

St No.:

St Name:

Suburb:

State:

Postcode:

Contact Information

Please provide at least one contact phone number *

Business Phone:

Email:

Mobile Phone:

Fax:

7. Declaration

This form must be signed by the applicant *

Remember it is against the law to provide false or misleading information, which could result in a heavy fine and cancellation of the permit.

I declare that all the information in this application is true and correct and the owner (if not myself) has been advised of the amended permit application.

Signature

Date:

dd/mm/yyyy

8. Information checklist

Have you:

Filled in the form completely?

Paid or included the application fee? (Contact council to determine the appropriate fee).

Email all necessary supporting information and documents to info@kingston.vic.gov.au

9. Lodgement

Lodge the completed and signed form and all documents with:

Email

info@kingston.vic.gov.au

Deliver

Council Name: Kingston City Council

Council Address: 1230 Nepean Highway, Cheltenham

Mail

Council Address: PO Box 1000, Mentone, Victoria, 3194

For help or more information

Telephone: 9581 4131

Fax: 03 9581 4500

Email: info@kingston.vic.gov.au

Privacy Notice

Information submitted as part of this application will be used by Council to assess your application for the amendment of a planning permit in accordance with the *Planning and Environment Act 1987* and for related municipal purposes. Information will be included in a public register of planning applications and may be disclosed to external consultants and to referral authorities in order to assess your application, and to other external parties as required by law.

All planning applications are available for public inspection at Council's offices during the assessment period and until the end of the latest period during which an application for a review may be made. During the assessment period information from this application will be available on Council's website as part of Advertising Documentation and may be available at public meetings.

The applicant may request a copy of their application from Council's Planning Team at any time. If you fail to provide all or part of the information required Council will get in touch with the nominated contact on this form to request further information. For further information contact Council's Planning Department on 9581 4131.

Attachment to Application to amend a Planning Permit Application currently under assessment

Please return this form with payment and ensure the form is completely filled out prior to obtaining a receipt.

Applicant's Name:

Applicant's Postal Address:

Subject Property Address:

Number: Street/Road:

Suburb:

Postcode:

Description of Works:

Description: Section 57A Amendment - Planning

For office use only

APPLICATION NUMBER	APPLICATION TYPE	AMOUNT	RECEIPT NO.
KP /	Section 57A Amendment - Planning		

AMEX / MASTERCARD / VISA AUTHORISATION

CREDIT CARD. Your signature below is an authority for Council to issue a sales voucher for the amount shown below as your payment for this account.

CREDIT CARD NUMBER

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Please tick appropriate box

VISA MASTERCARD AMEX

Card Expiry Date: _____

Amount \$ _____

Card Holder's Name:

Card Holder's Signature: _____

Date: _____