APPLICATION FOR DEVELOPMENT APPROVAL

Owner Details				
Name: Tim Wyatt				
ABN (if applicable):				
Address: 16007 great so Postcode.6311	outhern highway Cuba	lling		
Phone: Work: 0428520334 Home: Mobile: 0428520334	Fax:	Email: wyattt@outlook.com.au		
Contact person for corre	spondence: Tim Wyat	t		
Signature: Type		Date: 24-9-20		
Signature:		Date:		
without that signature.	For the purposes of in the Planning an	Il applications. This application will not proceed signing this application an owner includes the development (Local Planning Schemes)		
Applicant Details (if di	fferent from owner)			
Name: Yornaning Grazin	ng			
Address: 16007 Great S	outhern hwy	Postcode: 6311		
Phone: Work: 0428520334 Home:	Fax:	Email: wyattt@outlook.com.au		
Contact person for corre	spondence: Tim Wyat	t		
		pplication may be made available by the local ith the application. ☑ Yes ☐ No		
Signature:		Date: 24-9-20		

Lot No:	House/Street No:	Location No:	
		Lot 2909, 6461	
Diagram or Plan No:	Certificate of Title Vol. No:	Folio:	
Title encumbrances (e.g	g. easements, restrictive covenan	ts. N/A	
Street name:	Suburb:		
Great Southern Hwy	Yornaning		
Nearest street intersect	ion: Great Southern		
Proposed Development			
Nature of development:	☐ Works		
	☐ Use		
	☐ Works and use		
Is an exemption from de	evelopment claimed for part of the	development? 🔲 Y	es 🗆 No
If yes, is the exemption	for:		
	☐ Use		
Description of proposed	l works and/or land use:		
Expansion of existing P	iggery.		
Description of exemptio	n claimed (if relevant):		
	,	•••••	
Nature of any existing b	uildings and/or land use:		
As per supporting docur	•		
Approximate cost of pro	inceed develonment:		
\$800,000	posed development.		
Estimated time of comp	letion:		
		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	OFFICE USE ONLY	/	
Acceptance Officer's initial Local government referenc			