## Request for an Extension of Time to a Planning Permit

Under section 69 of the Planning and Environment Act 1987

Office Use Only							
Receipt Code			Receipt N	umber			
Date received				'			
An application under Section 69 of the Act (Extension of Time) must be made by the owner or occupier of the land. If not the owner/occupier, you must have written consent to act on behalf of the owner/occupier. Please note: Council has no jurisdiction to extend the permit if this request is made outside six months of the permit expiry date, or twelve months of the permit expiry date if the permit is for development and the development has been lawfully commenced.  Questions marked with an asterisk (*) are mandatory and must be completed.							
Contact Person (the person to contact regarding this application)							
First Name*			L	.ast Name*			
Company Name (if ap	plicable)						
Street/Postal Addres	s						
Suburb*			P	Post Code*			
Phone			N	/lobile			
Email							
Applicant Details							
☐ Same as contact person  Did you lodge the original Planning Permit application?* ☐ Yes ☐ No							
Did VCAT direct Council to iss			☐Yes	□No			
First Name*		•		ast Name*			
Company Name (if ap	plicable)						
Street/Postal Addres	s						
Suburb*			P	Post Code*			
Phone			N	/lobile			
Email							
Address to Which t	the Amalia	nation Applica					
Address to Which the Application Applies							
Choose the type of formal land description*  Street Address Lot/Plan Crown Allotment Other							
Street Address		II GOWIT Alloutherit		51 			
Suburb*			P	Post Code*			
			-				
Permit Details							
Permit Number				Date Perm	nit		
Date you believe the permit has or will expire							
Is the extension request within six months of the permit expiry date?*				☐ Yes	□ No		
Has the permit previously been extended?*			☐ Yes	□ No			

Wadawurrung Country; 1 Merrijig Drive / P.O. Box 350, TORQUAY, VIC, 3228 Ph: 03 5261 0600 Email: <a href="mailto:planningapps@surfcoast.vic.gov.au">planningapps@surfcoast.vic.gov.au</a>



What does the permit allow?*							
	□ Vaa						
Has the use and/or development commenced?*	☐ Yes ☐ No Date of comm	nencement?					
What length of time are you requesting (specify if your request is to extend the time for commencement or completion) AND the reason for requesting an extension of time*							
Supporting Documents							
Additional information needed, please supply act all changes being request information with your app	lditional information with ted. If the use and/or dev	your application, sum elopment have comm	marising the reasons for enced please supply				
Payment Details							
Fees: First Request - \$350.00							
Second Request - \$400.00 Third and Subsequent Requests - \$600.00							
Declaration (Please select)							
<ul> <li>□ I am the owner OR</li> <li>□ I have notified the owner of the proposed amendment</li> </ul>							
I understand and acknowledge that:							
<ul> <li>The information provided in this request is true and complete to the best of my knowledge</li> <li>Surf Coast Shire Council may refuse this request if it becomes evident that any information or supporting documents provided are incomplete or false.</li> </ul>							
By ticking this checkbox I confirm that I have unders	stood all the statements a	bove*					
Name of person completing this request*		Da	te				

Privacy Statement: The Surf Coast Shire considers that the responsible handling of personal information is a key aspect of democratic governance, and is strongly committed to protecting an individual's right to privacy. Council will comply with the Information Privacy Principles as set out in the Information Privacy Act, 2000. The information will not be disclosed to any other party unless Council is required to do so by law.

