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								
	erson							
☐ 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			

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What does the permit allow?*									
Has the use and/or development commend	☐ Yes ☐ No Date of commencement?								
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									
needed, please all changes bein	supply additional g requested. If the	ding attachment electronically, ple information with your application, e use and/or development have co which supports the date of comme	summar mmenc	rising the reasons for ed, please supply					
Payment Details									
Fees: First Request - \$362.00 Second Request - \$414.00 Third and Subsequent Requests - \$620.00									
Declaration (Please select)									
☐ I am the owner OR ☐ I have notified the owner of the propos	ed amendment								
I understand and acknowledge that: • The information provided in this requese. • Surf Coast Shire Council may refuse the provided are incomplete or false. By ticking this checkbox I confirm that	nis request if it bed	comes evident that any information		porting documents					
Name of person completing this request*			Date						
Privacy Statement: The Surf Coast Shire is committed to pr	rotecting your privacy	and is bound by the Information Privacy P.	rinciples ii	n the Privacy and Data					

Privacy Statement: The Surf Coast Shire is committed to protecting your privacy and is bound by the Information Privacy Principles in the Privacy and Data Protection Act 2014 (Vic) ('PDP Act'). The personal information requested on this page is being collected by Surf Coast Shire for the purpose of Statutory Planning processes. We will not disclose your personal information without your consent, except where required or authorised to do so by law. Our privacy policy is available on our website and or contact Customer Service. If you wish to alter any of the personal information you have supplied to Surf Coast Shire, please contact us by sending an email to info@surfcoast.vic.gov.au.

Surf coast