

Application for a Bushfire Attack Level (BAL) Risk Assessment

State Environmental Planning Policy (Exempt and Complying **Development) 2008**

Postal Address: General Manager PO Box 61 GLEN INNES NSW 2370 Phone: (02) 6730 2350 Fax: (02) 6732 3764

Email: council@gisc.nsw.gov .au

Office Use Only						
BAL Certificate No :	BAL Fee :	101				
Assessment No:	Other Fees:	Cashiers Initial	l			
Date of Receipt :	Verified By :					
Receipt Number :	TOTAL :					

All associated fees are listed in Council's current Operational Plan.

Privacy Notification: In completing this form you will be prompted to supply information that is personal information this information is collected under the Privacy and Personal Information Act 1998. The supply of this information is voluntary. If you cannot provide, or do not wish to provide, the information sought Council may be unable to process your request. Council requires the provision of the owner/s name and address with signature/s to verify owner/s permission for the lodgment of this Complying Development Certificate Application. Glen Innes Severn Council is required under the Privacy and Personal Information Act 1998 to inform you about how your personal information is being collected and used. If you require further information please contact Council's Department of Development, Planning and Regulatory Services on (02) 6730 2350.

☐ Indicates to please tick (where appropriate).

APPLICANT'S DETAILS							
Title: □ Mr	□ Mrs	□ Miss	□ Ms	□ Other			
Name:							
Address:							
Mobile:	Home:						
Email:		Fax:					
Signature:			Date:				
Inspection Contact Na							
NOTE: The application	may only be made by one of the						
☐ the owner of the bu	uilding;						
☐ the purchaser unde	er a contract for sale of the proper	rty, his/her solicitor or ago	ent;				
☐ a public authority w	which has notified the owner of its	intention to apply; or					
\square a person with the c	onsent in writing of the owner of t	the building (a copy of the	e consent is required to	be submitted also).			
	OV	VNERS DETAILS					
Name:							
Address:							
Signature/s:			Date:				
NOTE: If the owner is a comust sign and clearly indicate.	mpany or Owners Corporation, its co ate the A.C.N.	mmon seal must be stampe	d over the signature/s othe	rwise the Managing Dire			

	ACCOMPANYING I	DOCUMENTATION REQUIRED				
□ Site Plan		The Site Plan is to be drawn to scale and show; lot boundaries, setbacks and distances for all structures on as well as all vegetation types, locations and distances from structures. Floor Plans and Elevations are to				
☐ Floor Plans		to scale and show existing and proposed works.				
□ Elevations						
PROPERTY IDENTIFICATION						
Lot:	Section:	DP:				
Street No:	Street:	Suburb:				
Special Access Requ	irements (e.g. Locked Gate, Do					
	PROPOS	SED DEVELOPMENT				
Type of Development Estimated Cost of Works (if building work involved)						
□ Erect New Dwelli	NOTE: The Estimated Cost must include the total cost of the development, labour and materials or the					
☐ Alterations and A		contract price including GST. If more than one structure is proposed, provide a cost for each so Council refers to Ralston's Building Cost Guide to determine minimum estimated value of wor				
☐ Ancillary Building	ary Building \$					
Description of Work	s:					
Current Use of Site:						
Total Floor Area:	n	n ² Total Site Area:	m^2			