



Notice to Surrender Development Consent

Section 104A Environmental Planning & Assessment Act 1979

Application No. _____

| SECTION A. Details of the Applicant | | | |
|--|-------------|--------------------|----------|
| Mr | Ms | Mrs | Miss |
| First Name | | Family Name | |
| Unit No. | Street No. | Street | |
| Suburb | | State | Postcode |
| Daytime Telephone | | Mobile | |
| Email | | | |
| SECTION B. Location and Title Description of the Property | | | |
| Unit No. | Street No. | Street | |
| Suburb | | State | Postcode |
| Lot No. | Section No. | | |
| Deposited Plan/Strata Plan No. | | | |
| SECTION C. Details of Development Consent | | | |
| Development Consent No. | | Determination Date | |
| Complying Development Certificate No. | | Determination Date | |
| Construction Certificate No. | | Determination Date | |
| Description of the development consent to be surrendered | | | |
| SECTION D. Owner(s) Consent | | | |
| As owner(s) of the land to which this application relates, I/we consent to surrender this development consent. | | | |
| Name(s) | 1. | 2. | |
| Owners Signature(s) | 1. | 2. | |
| Date | | | |
| If you are signing on the owner's behalf as the owner's legal representative, please state the nature of your legal authority and attach documentary evidence. | | | |
| (e.g. Power of attorney, executor, trustee, company director) | | ABN | |

SECTION E.**Applicant's Declaration**

To be signed by the applicant, if a Company/Owner's Association, this must be signed by a director/secretary or authorised delegate.

I wish to surrender the development consent mentioned in this application

I wish to apply for any refund which may be due to me.

If development has commenced to be carried out in accordance with the consent -

(i) that so much of the development as has been carried out has been carried out in compliance with any condition of the consent, or any agreement with the consent authority relating to the consent, that is relevant to that part of the development, and

(ii) that the surrender will not have an adverse impact on any third party or the locality.

I understand that the information supplied on this form and any related document will be made accessible to the public, on Council's website and may be copied at Council under the GIPA Act 2009.

Name

Signature

Date

HOW TO LODGE THIS APPLICATION**Address the application to:**

City of Canterbury Bankstown

Postal Address

PO Box 8

BANKSTOWN NSW 1885

Email: council@cbc.city.nsw.gov.au

Street Address

Bankstown Customer Service Centre

Upper Ground Level

Bankstown Civic Tower

66-72 Rickard Road

BANKSTOWN NSW 2200

Campsie Customer Service Centre

137 Beamish Street

CAMPSIE NSW 2194

How to contact us:

Ph: (02) 9707 9000

Office Use Only – Fees

Fees Paid \$

Receipt No.

Receipt Date

TOTAL AMOUNT REFUNDED \$

Reason

Authorised by

Name of Assessing Officer

Processed by

Date

PRIVACY NOTICE

Council is required under the Privacy and Personal Information Protection Act 1998 (PPIPA) to collect, maintain and use your personal information in accordance with the Privacy Principles and other relevant requirements of the PPIPA.

Personal information requested on this form will only be used to fulfil the purpose for which it is being collected. Provision of this information is voluntary and is

required to help process your application. Council is regarded as the agency that holds the information and access is restricted to council officers and other

authorised people. You may apply to access or amend the information. For further information or clarification please contact the Privacy Contact Officer at Council.

BANKSTOWN CUSTOMER SERVICE CENTRE

Upper Ground Floor, Civic Tower, 66-72 Rickard Road,
Bankstown NSW 2200, PO Box 8, Bankstown NSW 1885

CAMPSIE CUSTOMER SERVICE CENTRE

137 Beamish Street, Campsie NSW 2194
PO Box 77, Campsie NSW 2194

CANTERBURY-BANKSTOWN COUNCIL

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