

Modification / Surrender of Consent

Under Sections 4.17(5) and 4.63 of the Environmental Planning and Assessment Act 1979 and Clause 68 of the Environmental Planning and Assessment Regulation 2021.

DA no:	
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About this form

Use this form if Council imposes a condition requiring the modification or the surrender of a previous consent or of an existing use on your property. This form will provide details of the consent/existing use right to be modified or surrendered. The modification or surrender of the development consent or existing use right takes affect when Council receives this form. You may also use this form to make a voluntary surrender of development consent under Section 4.63.

Contact details	3				
Title:]			
Full name:					
Company contact:				ABN / ACN:	
Address:					
Phone:		Email:			
Site details (Lo	cation and title description of the pro	operty)			
Unit, shop or suite no:			Street no:		
Street name:			Suburb:		
Lot(s):			Section:		
Deposited plan(\$):		Strata plan:		
Who owns the	land?				
Title:]			
Full name:					
Company contact:				ABN / ACN:	
Address:					
Phone:		Email:			

Owner's details and consent

NOTE: Must be signed by the owner of the land. If more than one owner, **every** owner must sign. If the owner is a company or owner's association, must be signed by a director under common seal, or by provision of ABN/ACN together with your position in that Company.

As the registered owner(s) of the land to which this application relates, I/we consent to this application.

Family name:									///////////////////////////////////////		
Given name:											
Company name:									Affix Com	imon Seal	
Signature:						Date:					
Address:											
Family name:					Given	name:					
Company name:											
Signature:						Date:					
Address:											
Company/ Strata Corp:				Positio	n:			ABN / ACN:			
Description of t	the develo	pment cons	sent or exis	sting use	rights						
Indication whet	ther the co	nsent or rio	ght is to be	modified	d or sur	render	ed				
											_
Declaration											
I declare that all th	he informatio	n given is tru	ie and correc	:t.							7
Name:											
Signature:						Date:					

Acknowledgement of application

We will acknowledge that we have received your application and advise that the relevant consent has been surrendered.

Privacy

For more information about Privacy & Personal Information Policy: <u>www.woollahra.nsw.gov.au/privacy</u>.

Lodgement details							
Mail to:	Woollahra Municipal Council PO Box 61 Double Bay 1360	In person:	Council Chambers 536 New South Head Road Double Bay NSW 2028				
Email:	records@woollahra.nsw.gov.au	Telephone:	(02) 9391 7000				
Website:	www.woollahra.nsw.gov.au						