

## **Application for an Amendment Under Secondary Consent**

Office use only

Use this form to make minor from the Responsible Author Planning Permit.				
Council cannot consider a ch	or Receipt Date:			
any conditions contained wit	Receipt No:			
may cause detriment to any p Council can decide to modif	Cashier:			
and/or development not cons approved, and the amendment planning controls which lead t	lly			
An application cannot be ac amended plans (if required) endorsed plans and the asses				
An explanation of the changes and why they are needed should also be provided.				
The Responsible Authority has the right to choose not to approve your proposed amendment under Secondary Consent.				
Please print clearly in <b>black</b> or <b>blue</b> pen.				
Need help with the application?  Contact council on (03) 5018 8100 to discuss the requirements of this application. Insufficient or unclear information may delay your application.				
Has there been a pre- application meeting with a	Yes No			
council officer:	If yes, with whom?		Date:	
The Land				
Address of the land				
	Street No:	Street Name:	Suburb:	
	Lot/CA No:	PS/Section No:	Parish:	
The Planning Permit				
Why is the extension required?				
Attach an additional page if	Planning Permit Number:			
there is insufficient room.	What does the Permit allow?			
	Condition No.(s):			
The condition would normally state; "The development as shown on the endorsed plans must not be altered or modified without the prior written consent of the Responsible Authority"				
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The Amendment P	roposal
What is the	
amendmentbeing	
applied for?  Detail any changes sought to the plans or any other documents endorsed underthe permit	
Attach a	
supplementarypage if more room is required.	
Why is the amendment	
required?	
State the reason for the change?	
Attach a	
supplementary page if	
more room is required.	
Annlicent details	
Applicant details	Name:
Provide details of the applicant.	
<del>-</del>	Organisation:
The person you want council to communicate with about the	Postal Address:
application.	Contact phone:
	Mobile phone:
	Email:
Declaration	
This form must be signed	I declare that all the information in this application is true and correct and the owner (if not myself) has
	provided written consent to lodge the application.
! Remember it is against the	
law to provide false or	Name:
misleading information, which	
could result in a heavy fine.	
	Signature:
	Date: DD / MM / Y Y Y
	Date:   D   D   /   M   M   /   Y   Y   Y
l a da a se a se t	
Lodgement	
Lodge the completed and	E-mail: planning.services@mildura.vic.gov.au
signed form and all documents	
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with:

Mildura Rural City Council PO Box 105

MILDURA VIC 3502

In Person: The Planning Department is located at the Madden Avenue Office, 108-116 Madden Avenue, Mildura.

For help or more information Telephone: (03) 5018 8100 Or visit <a href="https://www.mildura.vic.gov.au/planning">www.mildura.vic.gov.au/planning</a>