

## (SD-FO-209) MODIFY A DEVELOPMENT APPLICATION

Office Use	Application No: _____
<b>PPIA DISCLAIMER</b> – The personal information provided on this form is collected by <i>Griffith City Council</i> for the purposes of processing this application by Council employees and other authorised persons. This form will be stored within Council's record management system and may be available for public access and/or disclosure under various NSW Government legislation.	
<b>Part 1: Applicant's Details</b>	
<i>(Your Name &amp; Postal Address)</i> Title: Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other _____ Family name (or company): _____ Given names (or ACN): _____ Postal address: _____ Postcode: _____ Phone: (w) _____ (h) _____ (m) _____ Contact person: _____ E-mail: _____ Signature(s) _____ Date ____/____/____	
<b>Part 2: Location Details</b>	
Unit No _____ House No _____ Street _____ Locality/Town _____ Lot(s) _____ Section _____ DP/ SP _____	
<b>Part 3: Landowner's Details</b>	
Title: Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Miss <input type="checkbox"/> Ms <input type="checkbox"/> Other _____ Family name (or company): _____ Given names (or ACN): _____ Postal address: _____ Postcode: _____ Phone: (w) _____ (h) _____ (m) _____ Contact person: _____ E-mail: _____ Signature(s) _____ Date ____/____/____ _____ Date ____/____/____ _____ Date ____/____/____	
<b>Part 4: Development Details</b>	
Original Development Consent No: _____ / _____ Original date of determination of DA: _____ / _____ / _____	
<b>Part 5: Checklist</b>	
<i>Have you included the following information in conjunction with this form?</i>	
<b>AMENDED PLANS - 4 copies drawn to scale:</b>	<i>Please tick appropriate box</i> YES NO Office Use <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
➤ Reflecting the plans/design layout originally approved by Council	
➤ Highlighting proposed changes (eg: by circling proposed changes)	
<b>AMENDED STATEMENT OF ENVIRONMENTAL EFFECTS - 4 copies detailing:</b>	
➤ Description and justification of the proposed amendment(s) to the development	YES NO Office Use <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
➤ Proposed changes to conditions of development consent (eg: amendments, deletion, etc)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Additional copies of plans and statement of environmental effects may be required if the original proposal was integrated or designated development	

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### Part 6: Modification Details

#### DETAILS AND JUSTIFICATION OF AMENDMENT(S)

➤ (use separate pages if required)

Condition Number	Proposed Modified Wording	Reason

#### IF THE DESIGN IS CHANGING A DESCRIPTION OF THE CHANGE IS REQUIRED


#### Lodgement of Application

##### Hours of Lodgement:

Monday to Friday: 8:15 am – 4:00 pm

##### Fees:

Fees are payable on lodgement as per Council's current Revenue Policy. Quotations are available by contacting Council's Customer Service on (02) 6962 8100.

##### Payment methods:

Payment can be made by cash, cheque, credit card or EFTPOS. Cheques are to be made payable to 'Griffith City Council'.

##### How to contact us:

Phone:(02) 6962 8100

E-mail: [admin@griffith.nsw.gov.au](mailto:admin@griffith.nsw.gov.au)

Web: [www.griffith.nsw.gov.au](http://www.griffith.nsw.gov.au)

##### Postal address:

The General Manager  
Griffith City Council  
PO Box 485  
GRIFFITH NSW 2680

##### Personal or Courier Delivery:

Customer Service Centre  
Ground Floor  
Griffith City Council Administration Building  
1 Benerembah Street  
GRIFFITH NSW 2680