

## Office Use Only

VicSmart?

Specify class of VicSmart application:


Application No.:

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# Application for a Planning Permit

If you need help to complete this form, read MORE INFORMATION at the back of this form.

 Any material submitted with this application, including plans and personal information, will be made available for public viewing, including electronically, and copies may be made for interested parties for the purpose of enabling consideration and review as part of a planning process under the *Planning and Environment Act 1987*. If you have any concerns, please contact Council's planning department.

 Questions marked with an asterisk (\*) must be completed.

 If the space provided on the form is insufficient, attach a separate sheet.

 Click for further information.

Clear Form


## Application Type

Is this a VicSmart application?\*

☒ No ☐ Yes

If yes, please specify which

VicSmart class or classes:.....

 If the application falls into one of the classes listed under Clause 92 or the schedule to Clause 94, it is a VicSmart application.

## Pre-application Meeting

Has there been a pre-application meeting with a Council planning officer?

☒ No ☐ Yes

If 'Yes', with whom?:

Date:

day / month / year

## The Land

Address of the land. Complete the Street Address and one of the Formal Land Descriptions.

Street Address \*

Unit No.:

St. No.:599


St. Name:Sayers Road

Suburb/Locality:Hoppers Crossing

Postcode:3029

Formal Land Description \*

Complete either A or B.

 This information can be found on the certificate of title.

If this application relates to more than one address, attach a separate sheet setting out any additional property details.

A

Lot No.:2

☐ Lodged Plan

☐ Title Plan

☒ Plan of Subdivision

No.:830154S

OR

B

Crown Allotment No.:

Section No.:

Parish/Township Name:

**WYNDHAM CITY COUNCIL**  
**Town Planning**  
**Advertised Documents**

**Plan: 1 of 5**

## The Proposal

**A** You must give full details of your proposal and attach the information required to assess the application. Insufficient or unclear information will delay your application.

**i** For what use, development or other matter do you require a permit? \*

Development and use of a telecommunications facility (monopole antennas, equipment cabinets and fencing)

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bollards

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☒ Provide additional information about the proposal, including: plans and elevations; any information required by the planning scheme, requested by Council or outlined in a Council planning permit checklist; and if required, a description of the likely effect of the proposal.

Cost \$220,000

**A** You may be required to verify this estimate. Insert '0' if no development is proposed.

**i** Estimated cost of any development for which the permit is required \*

If the application is for land within metropolitan Melbourne (as defined in section 3 of the *Planning and Environment Act 1987*) and the estimated cost of the development exceeds \$1 million (adjusted annually by CPI) the Metropolitan Planning Levy must be paid to the State Revenue Office and a current levy certificate must be submitted with the application. Visit [www.sro.vic.gov.au](http://www.sro.vic.gov.au) for information.

## Existing Conditions **i**

Describe how the land is used and developed now \*

For example, vacant, three dwellings, medical centre with two practitioners, licensed restaurant with 80 seats, grazing.

~~Vacant~~ Carpark of adjacent medical centre.

☒ Provide a plan of the existing conditions. Photos are also helpful.

## Title Information **i**

Encumbrances on title \*

Does the proposal breach, in any way, an encumbrance on title such as a restrictive covenant, section 173 agreement or other obligation such as an easement or building envelope?

☐ Yes (If 'yes' contact Council for advice on how to proceed before continuing with this application.)

☐ No

☒ Not applicable (no such encumbrance applies).

☒ Provide a full, current copy of the title for each individual parcel of land forming the subject site. The title includes: the covering 'register search statement', the title diagram and the associated title documents, known as 'instruments', for example, restrictive covenants.

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**Plan: 2 of 5**



## Applicant and Owner Details

Provide details of the applicant and the owner of the land.

### Applicant \*

The person who wants the permit.

Please provide at least one contact phone number \*

Where the preferred contact person for the application is different from the applicant, provide the details of that person.

### Owner \*

The person or organisation who owns the land

Where the owner is different from the applicant, provide the details of that person or organisation.

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|  |             |                      |
|--|-------------|----------------------|
| Name:  |             |                      |
| Title:   | First Name: | Surname:             |
| Organisation (if applicable): Optus Mobile Pty Ltd |             |                      |
| Postal Address:                                    |             |                      |
| Unit No.:  | St. No.:    | St. Name: P O Box 50 |
| Suburb/Locality: Clayfield                         |             |                      |
| State: QLD   |             | Postcode: 4011       |

### Contact information for applicant OR contact person below

|                            |                                  |
|----------------------------|----------------------------------|
| Business phone:            | Email: mark@saqconsulting.com.au |
| Mobile phone: 0417 088 000 | Fax:                             |

### Contact person's details\*

Same as applicant ☐

|  |                  |                      |
|--|------------------|----------------------|
| Name:  |                  |                      |
| Title: Mr                                    | First Name: Mark | Surname: Baade       |
| Organisation (if applicable): SAQ Consulting |                  |                      |
| Postal Address:                              |                  |                      |
| Unit No.:                                    | St. No.:         | St. Name: P O Box 50 |
| Suburb/Locality: Clayfield                   |                  |                      |
| State: QLD                                   |                  | Postcode: 4011       |

|   |             |                          |
|---|-------------|--------------------------|
| Name:   |             |                          |
| Title:  | First Name: | Surname:                 |
| Organisation (if applicable): AFD Medical Pty Ltd |             |                          |
| Postal Address:                                   |             |                          |
| Unit No.:   | St. No.: 7  | St. Name: Rosemont Court |
| Suburb/Locality: Tarneit                          |             |                          |
| State: VIC  |             | Postcode: 3029           |
| Owner's Signature (Optional):                     |             | Date:                    |
|   |             | day / month / year       |

## Information requirements


Is the required information provided?

☒ Yes ☐ No

Contact Council's planning department to discuss the specific requirements for this application and obtain a planning permit checklist.

## Declaration

This form must be signed by the applicant \*

 Remember it is against the law to provide false or misleading information, which could result in a heavy fine and cancellation of the permit.

I declare that I am the applicant; and that all the information in this application is true and correct; and the owner (if not myself) has been notified of the permit application.

Signature:

Date: 2/11/21

day / month / year

**WYNDHAM CITY COUNCIL**  
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**Plan: 3 of 5**

## VIC Lands

### TITLE SEARCH ON 12146 / 719

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The Victorian Government acknowledges the Traditional Owners of Victoria and pays respects to their ongoing connection to their Country, History and Culture. The Victorian Government extends this respect to their Elders, past, present and emerging.

#### REGISTER SEARCH STATEMENT (Title Search) Transfer of Land Act 1958

VOLUME 12146 FOLIO 719

Security no : 124092955560C  
Produced 08/10/2021 11:31 AM

#### LAND DESCRIPTION

Lot 2 on Plan of Subdivision 830154S.

##### PARENT TITLES :

Volume 09346 Folio 516      Volume 09469 Folio 560      Volume 09536 Folio 499

Volume 10504 Folio 369

Created by instrument PS830154S 03/09/2019

#### REGISTERED PROPRIETOR

Estate Fee Simple

Sole Proprietor

AFD MEDICAL PTY LTD of 7 ROSEMONT COURT TARNEIT VIC 3029  
PS830154S 03/09/2019

#### ENCUMBRANCES, CAVEATS AND NOTICES

MORTGAGE AJ780942Q 06/07/2012

MEDFIN AUSTRALIA PTY LTD

Any encumbrances created by Section 98 Transfer of Land Act 1958 or Section 24 Subdivision Act 1988 and any other encumbrances shown or entered on the plan set out under DIAGRAM LOCATION below.

#### DIAGRAM LOCATION

SEE PS830154S FOR FURTHER DETAILS AND BOUNDARIES

#### ACTIVITY IN THE LAST 125 DAYS

NIL

-----END OF REGISTER SEARCH STATEMENT-----

Additional information: (not part of the Registered Document Statement)

Street Address: 599 SAYERS ROAD HOPPERS CROSSING VIC 3029

ADMINISTRATIVE NOTICES

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NIL

eCT Control 00026E ROADS CORPORATION ROADS CORPORATION  
Effective from 03/09/2019

DOCUMENT END

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