

**CASSOWARY COAST REGIONAL COUNCIL**

PO Box 887

INNISFAIL QLD 4860

Ph: 1300 763 903

Email: enquiries@cassowarycoast.qld.gov.au**Application – Residential Services Building Standards - Referral Agency Assessment (QDC MP5.7)**

(Applicable Legislation: Planning Regulation 2017 – Schedule 9; Division 2)

1. Applicant details

Applicant's name (individual or company full name)	
Contact name	
Postal address	
Email address	
Name of Agent / Contractor (if not the applicant)	
Applicant reference number	

2. Property Details

Street address:				Lot on plan description:	
Unit No.	Street No.	Street name and locality	Postcode	Lot No.	Plan type and plan number

3. What is the nature of the work that requires assessment**Description of the proposal**

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4. Supporting documentation

☐ Completed Section 6	☐ Site Plan	☐ Elevation Plans
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5. Reasons and justification of this request
(ie: how does the proposal comply with the assessment criteria)

PART A – Residential services – [QDC MP5.7](#) assessment benchmarks

Information Request

☐ I agree to receive an Information Request if determined necessary for this development application

☐ I do not agree to accept an information request for this development application

Note: By not agreeing to accept an information request I, the applicant, acknowledge:

- That this development application will be assessed and decided based on the information provided when making this development application and the referral agency is not obligated under the DA Rules to accept any additional information provided by the applicant for the development application unless agreed to by the relevant parties
- Part 3 of the DA Rules will still apply if the application is an application listed under Section 11.3 of the DA Rules.

- That this development application will be assessed and decided based on the information provided when making this development application and the referral agency is not obligated under the DA Rules to accept any additional information provided by the applicant for the development application unless agreed to by the relevant parties
- Part 3 of the DA Rules will still apply if the application is an application listed under Section 11.3 of the DA Rules.

- ## Applicant's declaration

☐ I/We declare that all information in this application is true and correct at the time of lodgement.

Note: It is unlawful to provide false or misleading information.

Signature/s		Date	
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OFFICE USE			
Application Number:		Application Fee:	\$425.00

Information Privacy Statement:

Cassowary Coast Regional Council is collecting your personal information in accordance with the *Information Privacy Act 2009 (Qld)*, and other applicable laws. Your information is being collected for the purpose of processing your application and/or responding to your enquiry. It may be used by authorised Council officers and disclosed to other agencies or third parties where required or permitted by law. Providing this information is voluntary; however, if you do not supply the requested information, Council may be unable to provide the requested service. You have the right to access and amend your personal information held by Council, subject to legal constraints. For more information, please view Council's [Privacy Policy](#) on Council's website www.cassowarycoast.qld.gov.au

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