

## Pre-Lodgement Meeting Application

made under the Environmental Planning and Assessment Act (Section 149)

Disclaimer: The information provided by you on this form will be used by Parramatta City Council or its agents to process this application. The provision of this information is voluntary, however, if you do not provide the information, Council may not be able to fully process your application. Once collected by Council, the information can be accessed by you in accordance with Council's Access to Information Policy and Privacy Management Plan or in special circumstances, where Commonwealth legislation requires or where you give permission for third party access.

### PART 1 - Applicants Details

Applicant's Name	Family Name (or Company):
	Full given names: OR company contact person:
Postal Address	
	Suburb: Postcode:
Contact details	Phone No: Mobile:
Email Address	

### PART 2 - Description of Subject Land

Property Details	Following details are to be completed in full
Property Address	House No. Street Name:
	Suburb: Postcode:
Description of Proposed Development	

### PART 3 - Further Pre-Lodgement Information

Did you have a previous pre-lodgement meeting for this proposal? YES / NO

Previous pre-lodgement No. PL

Please submit three (3) copies of the following information and one (1) CD-Rom:

Plans  Site analysis  Survey Plan  one (1) CD-ROM  Proposal Description

Any relevant photos of site etc.  Other information to assist Council (please detail):

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### PART 3 - Further Pre-Lodgement Information (continued)

The following information may assist you to prepare for a pre-lodgement meeting with Council.

You need to:

Prepare preliminary plans drawn to scale including a site plan, floor plans indicating approximate levels and an indication of the bulk of the development.

Have regard to Council's Codes, Policies and Planning Instruments. These are available on the website at

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

or you may purchase either the document or CD from the Customer Service Centre at Council.

Carry out and document a site analysis which identifies constraints and opportunities for the site and relates the site to adjoining sites. Please refer to Part 2 of Parramatta DCP or Part 3 – Preliminary section of City Centre DCP which will assist you in preparing a site analysis. This can be in sketch form.

When you've prepared all of the above, submit this form with the required information attached and pay the applicable fee. Depending on the complexity of the application, a meeting may be arranged within a week or may have to wait for the next scheduled Panel meeting.

The fees payable for pre-lodgement meetings are reviewed each financial year. Please refer to the Schedule of Fees and Charges on Council's website for accurate up-to-date information on [www.parracity.nsw.gov.au](http://www.parracity.nsw.gov.au).

The fees applicable for Pre-Lodgement meetings are:

- \$220 (incl GST) for pre-lodgement applications for dwellings, alterations and additions to dwellings, or any other associated works; occupation or change of use of retail, commercial and industrial premises.
- \$550 (incl GST) for pre-lodgement applications for dual occupancy.
- \$1100 (incl GST) for pre-lodgement applications for child care centres, multi-unit developments, industrial and commercial developments that will be referred to a Pre-lodgement Advisory Panel.
- Pre-lodgement applications for residential flat buildings or mixed use developments will be referred to the Parramatta Design Review Panel and incur the cost of \$1236 (incl GST) for 3 storeys or less and \$2472 (incl GST) for above 3 storeys. Please refer to the separate Parramatta Design Review Panel checklist for the full list of required information.

Need more help? Please refer to Council's website for more information. Still can't find what you need? Please contact the development enquiry section on 9806 5524.

### PART 4 - Payment Details

Payment method

Method	Amount
Cash	\$
Cheque	\$
Credit Card	\$

Payments by credit card (the following information must be completed)

Visa

Credit Card No.:

MasterCard

Expiry Date:

Card Holders Signature:

Card Holders Name:

#### OFFICE USE ONLY

Date:

Amount: \$

Receipt No.: