

In person: 104 Hovell St, Wodonga, VIC 3690

Phone: (02) 6022 9300

Post: PO Box 923, Wodonga, VIC 3689 **Fax:** (02) 6022 9322 **Email:** info@wodonga.vic.gov.au

Please provide details of the person you want the council to communicate with about the application.	Title: <input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss
	Given name:
	Surname:
	Phone (work):
	Phone (home):
	Moblie:
	Fax:
	Email:
Planning permit number:	
Submitted by:	
Amendments requested.	
If insufficient room attach additional pages.	

The proposed amendment

1. Does not result in transformation of the proposal;
2. Does not authorise something for which primary consent is required under the planning scheme;
3. Has no consequence having regard to the purpose of the planning control under which the permit was granted; and
4. Is not contrary to specific requirements as authorised within the permit, which cannot be altered by secondary consent.

Officer's assessment.	
Comments on amendments	

Recommendations

It is recommended that the plans be endorsed as amended plans under secondary consent provided under condition/s _____ to form part of planning permit number ____/____

Declaration Remember it is against the law to provide false or misleading information, which could result in a fine.	Process completed by:
	Date: / /
	Name:
	<i>For delegated officer. I have checked the attached town planner's report. I agree with the recommendations as the council's delegate.</i>
	Signature:
	Date: / /
	<input type="checkbox"/> Team leader statutory and strategic planner
<input type="checkbox"/> Senior statutory planner	
<input type="checkbox"/> Manager - development	

Declaration This form must be signed by the person making the request. Remember it is against the law to provide false or misleading information, which could result in a fine.	I declare that all the information I have given is true to the best of my knowledge.
	Name:
	Signature:
	Date: / /

OFFICE USE ONLY

Plans collected by:	Signature:
Date collected:	Date mailed to applicant:

Personal and or health information collected by the council is used for municipal purposes as specified in the Local Government Act 1989. The personal and or health information will be used solely by the council for these purposes and or directly related purposes. The council may disclose this information to other organisations if required by legislation. The applicant understands that the personal and or health information provided is for the above purpose and that he or she may apply to council for access to and/or amendment of the information. Request for access and or correction should be made to the council's privacy officer.