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APPLICATION TO REZONE

[made under the *Environmental Planning and Assessment Act 1979*]

This application is required for all proposed rezoning of land.

A P P L I C A N T	NAME: POSTAL ADDRESS: P/C PHONE: (H) (W) I hereby apply to rezone the land described below Applicants signature..... Date	O W N E R	NAME: POSTAL ADDRESS: P/C PHONE: (H) (W) I/we, being the owner of the land to which this application relates, hereby consent to the making of this application. Owners signature..... Date.....
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L A N D	No: STREET/ROAD: LOCALITY: LOT No: DP: SECTION No: PORTION No: PARISH: AREA:
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P R O P O S A L	NAME OF LEP: EXISTING ZONING: PROPOSED ZONING: CURRENT USE OF THE SITE: PROPOSED USE OF THE SITE: DESCRIPTION OF ENVIRONMENT (Include physical and environmental factors on and off the site): REASON FOR REZONING:
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DATE RECEIVED:	RECEIPT NUMBER:	AMOUNT: (1233125)
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