

Application to Establish or Occupy Temporary Home

Subordinate Local Law 1.3 (Establishment or Occupation of Temporary Home) 2011

IMPORTANT NOTICE

Western Downs Regional Council is collecting personal information you supply on this form in accordance with *Local Government Act 2009*. The personal information collected on this form will be used to ensure compliance with *Local Government Act 2009* and maintain a register of approvals. Your personal information will be accessed by persons who have been authorised to do so. Your information will not be given to any other person or agency unless required by law. Your personal information is handled in accordance with the *Information Privacy Act 2009*.

Application type: New Approval \$124.00 Amendment to Approval \$NIL EH: _____

Proposed term: / / to / /



Applicant Details

Name:			
Postal Address:			
Suburb:		Postcode:	
Suburb:		Postcode:	
Phone (h):		Phone (w):	
Phone (m):		Fax:	
Email Address:			



Property Details

Property Name (if applicable):			
Lot on Plan:			
Address:			
Suburb:		Postcode:	
Owner Name:			
Owner Consent:			
Owner Postal Address:			



Attachments

- Plans showing design and dimensions of the proposed temporary home, including:
- Details of construction materials
 - Location of temporary home and permanent residence on property
 - Details of the toilet, bathing, laundry, water storage and refuse facilities
- Itemised valuation of the construction costs for both the temporary and permanent residences.
- Proof of financial resources to fund the construction of the temporary and permanent residences.
- For owner/builders, verification of sufficient cash flow for the construction of the temporary and permanent residence and proof of registration as an owner/builder with the Queensland Building Services Authority
- Written consent from land owner (if application not signed)
- Progress chart or similar showing significant milestones during the construction of each of the temporary and permanent residences



Customer Signature

Signature:	Name:	Date:	/	/
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Office Use Only

Assessment number:		EH No.:	
Amount paid:	\$	Date paid:	/ /
Receipt number:		Initials:	