Application for Temporary Accommodation

Please use this form if you wish to install, and reside in, a moveable dwelling on your property under the *Local Government Act 1993*. You must obtain Council approval **prior to** installing or residing in a moveable dwelling on your property. If you need assistance completing this form please telephone Council on (02) 6632 1611.

PART A: Applicant information

PP									
Applicant Name:									
Address:									
Contact Phone:	H:			M:					
Email address:									
PART B: Property det	ails								
Property owner nam	ie:								
Lot/Sec/DP number:									
Street address:									
Assessment number Rates Notice):	(see								
PART C: Current appr	ovals and	certificates							
Do you have a current development consent for a dw			velling on the	e property?	☐ YES	□ NO			
If Yes, please provide DA or CDC number:									
Do you have a current Construction Certificate for a dwelling on the property?						□ NO			
If Yes, please provide CC number:									
PART D: TYPE OF TEN	IPORARY I	DWELLING PROPOSED)						
☐ Manufactured home			☐ Caravan						
☐ Moveable dwelling			☐ Campervan						
☐ Tent									
☐ Other (please spe	ecify):								
PART E: DOCUMENTS									
- ·	-	are required to be pro in processing your app	-			•			
•	boundarie	oicting the location of y s, any existing structur natural vegetation		•	I	☐ YES			
For a manufactured specifications and pr	☐ YES								
		a sketch plan of the mand internal configurat							

Scaled drawings depicting the water supply (where applicator supply these services to you	_ `	YES									
For rural properties – an On-site Sewerage Management Report, prepared by a suitably qualified person, and in accordance with Council's <i>On-Site Sewage and Wastewater Strategy</i> and <i>AS/NZS 1547:2012 – On-site Domestic Wastewater Management</i> , describing how wastewater will be disposed on the property											
A statement regarding how telecommunication services will be provided and maintained to your temporary dwelling											
Plans depicting how vehicular access will be provided to your temporary dwelling											
Note: Separate approvals are required under the <i>Local Government Act 1993</i> to carry out water supply, sewerage and stormwater work, including installation of an On-site Sewerage Management System.											
PART F: Inspections											
Do you consent to a Council officer inspecting the property if required?						.	□ NO				
Please provide a contact phone number to arrange an inspection:											
PART G: Owners Consent											
This application form cannot be lodged without the property owner's consent.											
Property owner name:											
Residential Address:	Residential Address:										
Contact Phone:	H: M:										
Email address:											
Signature:			Date:								
PART H: Declaration											
I, the undersigned wish to lodge this application for temporary accommodation. I confirm that all plans and reports listed in Part E of this application form are included with the application. I declare that all information included in this application form is true and accurate to the best of my knowledge.											
Applicant signature: Date:											
Harris India del anni Parkan											
How to lodge this application Applications can be submitted in person at the Kyogle Council Administration Building, 1 Stratheden Street, Kyogle, via email to council@kyogle.nsw.gov.au , or via post to PO Box 11, Kyogle, NSW, 2474.											
Payment methods											
Payment must accompany this application. Payment can be made via direct bank deposit (see below account information), cheque or credit card (0.6% surcharge applies) by phoning Council on (02) 6632 1611. When making payment by direct bank deposit please email remittance advice to council@kyogle.nsw.gov.au including applicant name and Temporary Accommodation Application in the email.											
Account name: Kyogle Council BSB: 062-563 Account number: 00000011											
Privacy: Kyogle Council is collecting the personal information on this form for the purposes of assessing eligibility for temporary accommodation under the <i>Local Government Act 1993</i> . This information will not be disclosed to another party except as required by law.											
OFFICE LICE ONLY 2	-			01:12:	DAID						
OFFICE USE ONLY: Receipt No: Date: AMOUNT PAID:											