|  |  |  |
| --- | --- | --- |
| SGSCLogoLowRes | **Business Centre:**  Brown Street, Hamilton 3300  Telephone: (03) 5573 0444  Facsimile: (03) 5572 2910  TTY: (03) 5573 0458 | **Address all correspondence to:**  Locked Bag 685, Hamilton, Vic, 3300  [council@sthgrampians.vic.gov.au](mailto:council@sthgrampians.vic.gov.au)  *www.sthgrampians.vic.gov.au* |

**REPORT AND CONSENT – Application to Council for Approval to Vary the Building Regulations 2018**

**Regulation 130 – Building Over Easement**

|  |  |  |
| --- | --- | --- |
| **PROPERTY DETAILS** | | |
| **OWNERS NAME:** |  | |
| **LOT NO:** | **LP/ PS:** | **STREET NO:** |
| **STREET / ROAD:** | | |
| **TOWN / SUBURB:** | | |

|  |  |  |
| --- | --- | --- |
| **THE AGENT/APPLICANT** (It is recommended that the Relevant Building Surveyor assists with your application) | | |
| **NAME / COMPANY:** | | **CONTACT PERSON:** |
| **POSTAL ADDRESS:** | | |
| **TELEPHONE:** | | **MOBILE:** |
| **FAX:** | | **EMAIL:** |
|  |  | |
| **RELEVANT BUILDING SURVEYOR:** | | |
| **TELEPHONE:** | | **MOBILE:** |

I hereby seek application for Council consent (pursuant to **Regulation 130(1) of the Building Regulations 2018**) to allow construction of a building over an easement.

|  |  |
| --- | --- |
| **INFORMATION REQUIRED FOR APPLICATION TO BE CONSIDERED:** | Office Use  Only |
| * Copy of title including plan of subdivision and any applicable covenants, agreements and/or building envelopes | ❑ |
| * Fee - Refer to current statutory fee structure | ❑ |
| * Site plan to a scale of 1:500 showing all dimensions and setbacks of the proposed building, adjoining buildings and the buildings on the adjoining allotments. | ❑ |
| * Elevations and floor plan of the proposed building, including the slope of the land. | ❑ |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **REASONS FOR APPLICATION** | | | | | |
| **(PLEASE NOTE:** Unless clear reasons are provided, this application **will** be rejected) | | | | | |
|  | | | | | |
|  | | | | | |
|  | | | | | |
|  | | | | | |
| ***SIGNATURE*** |  | ***DATE*** |  | ***RECEIPT NO.*** |  |

|  |  |  |
| --- | --- | --- |
| **OFFICE USE ONLY** | | |
| ***Site inspection comments:*** | | |
|  | | |
|  | | |
|  | | |
| ***Adjoining property owner/s comments:*** | | |
|  | | |
|  | | |
| ***Completed and Approved Building Over Easement Agreement Received*** | ***Yes* ❑** | ***No* ❑** |

|  |
| --- |
| **NOTES:** |
| Council will consider the needs of the applicant and also the potential impact upon the adjoining properties and or infrastructure when making its decision. As such this application will be referred to the affected owners for comment prior to making a decision.  The personal information requested on this form is being collected by Council for assessment of your application for a Consent and Report pursuant to Building Regulation 130. The personal information will be used solely by Council for this primary purpose or directly related purposes. The applicant understands that the personal information provided is for the assessment of the consent and report application and that she/ he may apply to Council for access to and/or amendment of the information. Requests for access and/or correction should be made to Council’s Privacy Officer. |