

## APPLICATION FOR FORM 15C - COMPLETION OF APPROVAL CONDITIONS

APPL	ICANT DETAILS			
Annli	cant Name			
	pany Name (if applicable)			
	espondence Address  I Address			
	e Number			
	<u> </u>			
APPLICABLE	Project Planner			
	Phone Number			
<u>C</u>	Email Address			
٦				
IF AP	Project Engineer			
	Phone Number			
	Email Address			
ΔΡΡΙ	ICATION DETAILS			
ALLE	IOATION DETAILO			
Development Approval				
	ence Number			
Approval Date				
Property Address				
Number of Lots to Clear				
	a Plan Number			
	Estate Name and Stage			
(if app	licable)			
DECL	ARATION			
		been satisfied and I understand that anything left incomplete wil		
		able to proceed. I also understand that additional site inspections		
issued		ay incur supplementary fees to be paid prior to clearance being		
100000	•			
SIGNE	ED:	NAME AND POSITION:		
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City of Cockburn Application for Clearance – Completion of Approval Conditions
9 Coleville Crescent, Spearwood WA 6163 PO Box 1215, Bibra Lake DC WA 6965 P 08 9411 3444 F 08 9411 3333 cockburn.wa.gov.au

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## **REQUIRED DOCUMENTS**

	Attached
Two Copies of the Strata Plan (Printed to Scale – 1:100 or 1:200)	
Copy of Planning Approval and Plan	

## **CONDITIONS TO CLEAR**

Condition No.	Details of How Condition Has Been Completed to the Satisfaction of City

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