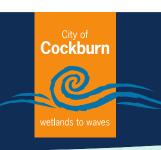


Environmental Protection (Noise) Regulations 1997 Application Approval of Out-Of-Hours Construction Work

This application form must be accompanied by a job specific Noise Management Plan and all supporting information required by Regulation 13 of the above mentioned Regulations and listed overleaf. This application form and noise management plan should be lodged with the City of Cockburn Health Services at least 2 weeks prior to the planned works.

The assessment of applications that are incomplete may be delayed or refused.

Applicant's	s Details:					
Applicant's Name:		Phone:				
Organisation:		Mobile:				
Email:		ABN:				
Address:	Street address					
	Suburb	Post code				
Details of F	Proposed Construction Works:					
Proposed L	ocation of Works:					
Description of the Proposed Works:						
Provide a clear justification as to why the proposed works must occur outside the hours of 7am to 7pm, Monday to Saturday:						
Proposed Works Schedule	Proposed Date(s):					
	Proposed Hours:					



				-	_			-
Λ	tta	m	nn			~ 10	1116	3 10
					C I	 L.D	•••	1

Attachment Checklist:				
l have	attache	ed the following information in support of my Application:-		
	Clear j	ustification as to why these proposed works cannot be undertaken during the hours		
	7am to	7pm, Monday to Saturday;		
	A Nois	e Management Plan including:		
	0	A site plan showing the proposed area of works and description of the proposed		
		works activity;		
	0	Information on the anticipated noise level(s) associated with the proposed work(s)		
		activity;		
	0	Information on what the assigned (permitted) noise levels are for properties		
		receiving noise above the assigned noise levels; and		
	0	a map indicating lots that are affected by noise levels greater than the assigned		
		noise levels;		
	А сору	of the letter to be sent to noise affected properties which must include:		
	0	A contact number which will be answered for the duration of the works during the		
		hours of the works;		
	0	A clear description of the proposed works and;		
	0	Information on the anticipated mail drop delivery date(s).		

Declaration:

 ☐ I understand that submitting this application does no ☐ I understand that upon submission of this Application payment of the Application Fee of \$205.00. 	•			
Signature of applicant:	Date:			
In the case of a company, the signing officer must state their position within the company.				

Contact details:

City of Cockburn 9 Coleville Crescent Spearwood PO BOX 1215, Bibra Lake DC WA 6965 T: 08 9411 3444