Survey Plan of Subdivision, Easement/s or Community Management Statement Endorsement Request Form

Privacy Notice: Council deals with personal information in accordance with law, including the Information Privacy Act 2009.

This form is to be completed when requesting endorsement of a Survey Plan of Subdivision, an Easement or a Community Management Statement for development approved and completed pursuant to a Development Approval issued by Rockhampton Regional Council under the *Planning Act 2016*.



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Applicant Details		
Applicant name:		
Postal address:		
Contact number:	Email:	
Proposed Development Details	,	
Details of the proposed development (for example, Material Change of U Statement):	lse, Reconfiguring a Lot, I	Easement, Building Format Plan, Community Manag
Survey Plan number:		
Council development approval number or permit number:		
Related approval permit/s (for example, Operational Works, Road Reserve	Works Permit, FRW Prive	te Works, if applicable to the development):
Location of the Premises (attach a separate schedule if there is	s insufficient space in this	table)
Street address	Lot and plan number	Estate name and stage number (if applicable)
OFFICE USE Amount:	Date receipted:	

Receipt number:

OFFICE USE ONLY

Application number:

Supporting Documentation	1		
Please remember to provide the follow	wing supporting documentation	when submitting this form:	
\square Endorsement of Survey Plan fee (refer to Council's <u>Fees and Cha</u>	arges Schedule).	
Statement), all signed by the regis	•	documents and schedules/Community Management e:	
 1. 1 x A3 copy of Survey Plan; or 2. A digital copy of the Survey Plan Plan. 	n including a Queensland Titles	Registry Form 18B – Planning Body Approval of Surve	Эy
\square A copy of any Referral Agency Co	nditions and their clearances (if	applicable).	
☐ For Building Format Plans where t plan.	he building was constructed price	or to 1 February 1973, a copy of the building/drainage	
\square A covering letter/report demonstrating how each condition has been complied with and any supporting documents.			
\square Evidence of payment of any Contr	ibution Fees/Infrastructure Char	rges (if applicable).	
\square Evidence of payment of any Incom	nplete Works Bond/s (if applicable)).	
\square Evidence of payment of any Defect	cts Bond/s (if applicable).		
☐ A copy of Bonding Deed documen	tation (if applicable).		
Fees and Charges			
Please select applicable fee:			
\square Building Format Plan or Reconfigu	ıring a Lot (Base Fee + Fee per	lot/s): \$	
☐ Community Management Stateme	ent or Re-sealing Fee: \$		
☐ Road Opening Fee: \$	_		
For a full list of fees and charges, plea	ase refer to Council's Fees and	Charges Schedule.	
Payment Information			
• • • • • • • • • • • • • • • • • • • •		2 Bolsover Street, Rockhampton; 32 Hall Street, Mount Centre: Walter Reid Centre, Level 2, 203 East Street,	
By phone Customer Service staff w	ill contact you regarding payme	nt via credit card or debit once this form is received.	
By post Make your cheques/money Rockhampton, Queensland, 4700.	order payable to 'Rockhamptor	n Regional Council' and send to PO Box 1860,	
Declaration (Note: It is unlawful to pro	vide false or misleading information.)		
I submit this request with the relevant true and correct.	supporting documentation as re	equired. I declare that all information in this request is	
Name:	Signature:	Date:	