

Shire of Mundaring  
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**LOCAL PLANNING SCHEME NO. 4  
 MODIFICATION TO PLANNING APPROVAL**

OWNER DETAILS			
Name:			
Address:			
Phone: Work	Home	Mobile	
Email:			
Signature:			Date:
Signature:			Date:
<i>The signature(s) of the land owner(s) are required on all applications.            This application will not proceed without those signature(s).</i>			
APPLICANT DETAILS			
Name:			
Address:			
Phone: Work	Home:	Mobile:	
Email:			
Signature:			Date:
Contact person for correspondence:			
PROPERTY DETAILS			
Lot No:	House/Unit No:	Street Name:	Suburb:
Proposal:			
Original Planning Approval ID:		Original Planning Approval Date:	
MODIFICATION DETAILS			
Description of the proposed modification:			
<i>OFFICE USE ONLY</i>			
Acceptance Officer's initials: ..... SOM Ref No .....			

