

Building Approval Amendment Request Form



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

This form is to be completed when a customer wishes to make an amendment or extension to an existing development approval. Section 79 and 86 of the *Planning Act 2016* requires a copy of this request to be provided to the assessment manager, any concurrence agencies, and any other entity prescribed by legislation relating to the original application.

P: 07 4932 9000 | E: enquiries@rrc.qld.gov.au | W: www.rrc.qld.gov.au | PO Box 1860 Rockhampton QLD 4700 | ABN: 59 923 523 766

Customer Details			
Applicant name:			
Postal address:			
Preferred contact number:		Email:	
Property Owner Details			
Owner name:			
Postal address:			
Existing Approval Details			
Application number:		Date issued:	
Site Details			
Street address:			
Street number and name		City	State Postcode
Lot number:		Plan number:	
Amendment Type			
<input type="checkbox"/> Extension of the period before an approval lapses			
<input type="checkbox"/> Change the development approval – but not a condition of approval			
<input type="checkbox"/> Change either the applicant, owner's name or builder's name associated with the application <i>(a new DA Form 2 is to be provided with the request and there is no fee applicable)</i>			
<input type="checkbox"/> Other – please provide details:			
Request Details, Reasoning and/or Justification			
Details of the requested amendment: <i>(e.g. length of extension required)</i>			

OFFICE USE ONLY	Fee amount:	Receipt number:
	Date paid:	CSO:

Reasoning/justification of the requested amendment:

If details have changed to one of the following, please indicate below:

- Owner details Applicant details
 Builder details (*Evidence of QBCC Home Warranty Insurance Cover must be provided*)

Name:

Postal address:

Preferred contact number:

Email:

Supporting Documentation

Please remember to provide the following supporting documentation when submitting this form:

- DA Form 2 – if changing the applicant's, owner's or builder's name associated with the application
 Evidence of QBCC Home Warranty Insurance Cover – if changing the builder's details

Declaration

I submit this form with the relevant supporting documentation as required. I declare that the details are correct to the best of my ability.

Name:

Signature:

Date:

Fees and Charges

For a full list of fees and charges please refer to Council's [Fees and Charges Schedule](#).

Payment Information

In person | You can pay at Council's Customer Service Centres: 232 Bolsover Street, Rockhampton; 32 Hall Street, Mount Morgan, 1 Ranger Street, Gracemere; or at the Development Advice Centre: Walter Reid Centre, Level 2 203 East Street (Corner East and Derby Streets), Rockhampton City.

By phone | Customer Service staff will contact you regarding payment via credit card or debit once this form is received.

By post | Make your cheques/money order payable to 'Rockhampton Regional Council' and send to PO Box 1860, Rockhampton, Queensland, 4700.