

# Survey Plan of Subdivision Approval, Easement/s Approval or Community Management Statement Certification 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 a Survey Plan of Subdivision Approval, an Easement Approval or a Community Management Statement Certification for development approved and completed pursuant to a Development Approval issued by Rockhampton Regional Council under the *Planning Act 2016*.

P: 07 4932 9000 | E: [enquiries@rrc.qld.gov.au](mailto:enquiries@rrc.qld.gov.au) | W: [www.rrc.qld.gov.au](http://www.rrc.qld.gov.au) | PO Box 1860 Rockhampton QLD 4700 | ABN: 59 923 523 766

Applicant Details		
Applicant name:		
Postal address:		
Contact number:	Email:	
Proposed Development Details		
Details of the proposed development ( <i>i.e. Material Change of Use, Reconfiguring a Lot, Easement, Building Format Plan, Community Management Statement</i> ):		
Survey Plan number:		
Council development approval number or permit number:		
Related approval permit/s ( <i>e.g. Operational Works, Road Reserve Works Permit, FRW Private Works, if applicable to the development</i> ):		
Location of the Premises ( <i>attach a separate schedule if there is insufficient space in this table</i> )		
Street address	Lot and plan number	Estate name and stage number ( <i>if applicable</i> )
Supporting Documentation		
Please remember to provide the following supporting documentation when submitting this form:		
<input type="checkbox"/> Endorsement of Survey Plan fee (refer to Council's <a href="#">Fees and Charges Schedule</a> ).		
<input type="checkbox"/> The original document/s to be assessed (Survey Plan/Easement documents and schedules/Community Management Statement), all signed by the registered owner/s or body corporate:		
1. 1 x A3 copy of Survey Plan; or		
2. A digital copy of the Survey Plan including a Queensland Titles Registry Form 18B – Planning Body Approval of Survey Plan.		
<input type="checkbox"/> A copy of any Referral Agency Conditions and their clearances (if applicable).		
<input type="checkbox"/> For Building Format Plans where the building was constructed prior to 1 February 1973, a copy of the building/drainage plan.		
<input type="checkbox"/> A covering letter/report demonstrating how each condition has been complied with and any supporting documents.		
OFFICE USE ONLY		
Amount:	Date received:	
Receipt number:	Application number:	

- Evidence of payment of any Contribution Fees/Infrastructure Charges (if applicable).
- Evidence of payment of any Incomplete Works Bond/s (if applicable).
- Evidence of payment of any Defects Bond/s (if applicable).
- A copy of Bonding Deed documentation (if applicable).

## Fees and Charges

Please select applicable fee:

- Building Format Plan or Reconfiguring a Lot (Base Fee + Fee per lot/s): \$\_\_\_\_\_
- Community Management Statement or Re-sealing Fee: \$\_\_\_\_\_
- Road Opening Fee: \$\_\_\_\_\_

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, 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.

## Declaration (Note: It is unlawful to provide false or misleading information.)

I submit this request with the relevant supporting documentation as required. I declare that all information in this request is true and correct.

Name:

Signature:

Date: