

Request to modify a major project



NSW GOVERNMENT
Department of Planning

Date duly made: ____/____/____

Modification No. _____

1. Before you lodge

This form is required under section 75W of the *Environmental Planning and Assessment Act 1979* (the Act) in order to request the Minister to modify the Minister's approval to carry out a project or concept plan to which Part 3A of the Act applies.

Before making this request, it is recommended that you first consult with the Department of Planning (the Department) concerning your modification. The Director-General may issue environmental assessment requirements that must be complied with before your request will be considered by the Minister. If the changes proposed by the modification will result in a project that is consistent with the existing approval, the Minister's approval for a modification is not required.

Disclosure Statement

Persons making a request to modify a project or concept plan are required to declare reportable political donations (including donations of or more than \$1,000) made in the previous two years.

Note: For more details about political donations disclosure requirements, including a disclosure form, go to www.planning.nsw.gov.au/donations.

Lodgement

All modification requests must be lodged with the Director-General of the Department of Planning, by courier or mail. An electronic copy should also be e-mailed to the assessment contact officer assigned to the project.

NSW Department of Planning
Ground floor, 23-33 Bridge Street, SYDNEY NSW 2000
GPO Box 39 SYDNEY NSW 2001
Phone 1300 305 695

2. Details of the proponent

Company/organisation/agency

PROJECT 28 PTY LTD

ABN

61 003 916 613

☐ Mr ☐ Ms ☐ Mrs ☐ Dr ☐ Other

First name

Family name

Position

STREET ADDRESS

Unit/street no.

46

Street name

CAVILL AVENUE (LEVEL 1)

Suburb or town

SURFERS PARADISE

State

QLD

Postcode

4217

POSTAL ADDRESS (or mark 'as above')

P O BOX 1914

Suburb or town

SURFERS PARADISE

State

QLD

Postcode

4217

Daytime telephone

07 5520 5500

Fax

07 5570 5050

Mobile

0467 492311

Email

mgeale@ledaholdings.com.au

3. Identify the land

STREET ADDRESS (where relevant)

Unit/street no.

Street or property name

DEPOT ROAD (KINGS FOREST)

Suburb, town or locality

KINGSCLIFF

Postcode

2486

Local government area(s)

TWEED

State Electorate(s)

TWEED

REAL PROPERTY DESCRIPTION

SEE ATTACHED SCHEDULE

Note: The real property description is found on a map of the land or on the title documents for the land. If you are unsure of the real property description, you should contact the Department of Lands.

Please ensure that you place a slash (/) to distinguish between the lot, section, DP and strata numbers. If the proposed modification applies to more than one piece of land, please use a comma to distinguish between each real property description.

OR: detailed description of land attached: ☒

MAP: A map of the site and locality should also be submitted with this request.

4. Details of the original major project or concept plan

Briefly describe what the original approval allows

- Residential development for approximately 4500 dwellings;
- town centre and neighbourhood centre for future retail and commercial uses;
- community and education facilities;
- employment land;
- a golf course;
- open space;
- wildlife corridors;
- protection and rehabilitation of environmentally sensitive land;
- utility services infrastructure;
- water management areas and lake; and
- roads and pedestrian and bicycle paths

What was the original project application no.?

CP 06_0318

What was the date of the approval?

19.08.2010

What was the original application fee?

\$??

Note: Clause 245K of the *Environmental Planning and Assessment Regulation 2000* provides information on calculating the maximum fee for a request for modification.

5. Describe the modification you propose to make to the approval

Describe the proposed modification

MOD 3 - Modification of Conditions - see attached report, Darryl Anderson Consulting Pty Ltd, December 2013

Your modification request may need to be accompanied by an Environmental Assessment, including plans. An electronic and hard copy of this document will be required.

ESTIMATED CAPITAL INVESTMENT VALUE

Please indicate the estimated capital investment value (CIV) of the modification to the project approval or concept plan (excluding GST).

\$NIL

FULL TIME EQUIVALENT JOBS

Please indicate the number of jobs created by the proposed modification. This should be expressed as a proportion of full time equivalent (FTE) jobs over a full year.

Construction jobs (FTE)

NIL

Operational jobs (FTE)

NIL

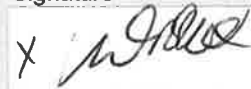
6. Landowner's consent (where required)

As the owner(s) of the above property, I/we consent to this request being made by the proponent:

Land

See attached Schedule

Signature

X 

Name

William Robert Ell, Director

Date

19/12/13

Land

See attached Schedule

Signature

X 

Name

Reg Van Rij, Company Secretary

Date

19/12/13

Note: Under Clause 8F of the *Environmental Planning and Assessment Regulation 2000* (the Regulation), certain applications for approval under Part 3A of the Act do not require consent of the landowner, however, the proponent is required to give notice of the application (e.g. linear infrastructure, mining & petroleum projects, and critical infrastructure).

7. Political donation disclosure statement

Persons making a request to modify a project or concept plan are required to declare reportable political donations (including donations of or more than \$1,000) made in the previous two years.

Have you attached a disclosure statement to this request?

- ☐ Yes
☒ No

Note: For more details about political donations disclosure requirements, including a disclosure form, go to www.planning.nsw.gov.au/donations.

8. Proponent's signature

As the proponent(s) of the project and in signing below, I/we hereby:

- provide a description of the modification to the project approval or concept plan and address all matters required by the Director-General pursuant to Section 75W of the Act, and
- declare that all information contained within this form is accurate at the time of signing.

Signature

X *WR*

Name

William Robert Ell, Director

In what capacity are you signing if you are not the proponent

Name, if you are not the proponent

Date

19/12/13