

Gateway Planning Proposal

To Change the Planning Controls for
the Lismore Health Precinct

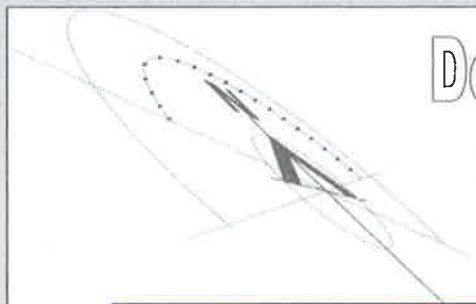
ON BEHALF OF
LISMORE CITY COUNCIL

Site: Lismore Health Precinct

Our Ref: 12/397

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Newton Denny Chapelle
SURVEYORS PLANNERS ENGINEERS



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The information contained in this report is based on independent research undertaken by Newton Denny Chapelle. To the best of our knowledge, it does not contain any false, misleading or incomplete information.

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Plans:

NDC Plan 1 – Lismore Health Precinct Investigation Area

NDC Plan 2 – Existing and Proposed Land Zoning Map

NDC Plan 3 – Existing and Proposed Building Heights Map

1. Background

1.1 Summary of Project

The health sector is the largest employment sector in the Lismore Local Government Area (LGA). The Australian Bureau of Statistics advises that in 2011, approximately 17.6% of the workforce was employed in health care and social assistance related jobs.

In recent years, Lismore City Council (LCC) has undertaken a range of consultations and technical investigations aimed at supporting health services in the LGA, with particular focus on the Lismore Health Precinct (LHP) in the vicinity of Lismore Base Hospital. This work has highlighted a demand for additional accommodation within close proximity to the hospital. These investigations have occurred in parallel with work undertaken by Northern NSW Local Health District (NNSWLHD) to develop a new Master Plan for the Hospital.

In addition, the Lismore Housing Strategy 2012 identified the need for additional infill housing within areas that are close to shops, community services, employment and transport options. The Strategy also identified the need for a greater mix of housing types including an increase in the available supply of 1 and 2 bedroom units.

Newton Denny Chapelle (NDC) have been engaged to provide recommendations with respect to potential changes to Council's town planning controls which will help encourage and support health related activities within the Health Precinct. This project is being funded via a Planning Reform Fund Grant received from the NSW Department of Planning and Environment.

The purpose of the Gateway Planning Proposal is to change the town planning provisions applying to parts of Health Precinct pursuant to the Lismore Local Environmental Plan 2012. This involves changing the land use zoning and building height controls in the majority of the Precinct.

1.2 Defining the Health Precinct

Lismore City Council has defined the Health Precinct as comprising the area surrounding the Lismore Base Hospital, generally as bounded by:

- Brewster Street to the west;
- Leycester and Orion Streets to the north;
- Hunter Street, Bent Street and Rotary Park Reserve to the east; and
- McKenzie Street and Uralba Street to the south.

The Precinct is centred on the Lismore Base Hospital (LBH). LBH is a regional referral, Level 5 Base Hospital which provided care to approximately 29,450 patients between 2011/2013. The Hospital acts as a drawcard for a range of health professionals. The hospital is expected to experience significant expansion in the short to medium term via the Stage 3A and 3B upgrades.

In addition to providing land uses ancillary to the Hospital, the Precinct is located in relatively close proximity to the Lismore City Centre and Lismore Square as well as a range of recreation and sporting facilities.

Plan 1 provides a Locality Plan for the Precinct. The Precinct has a total area of approximately 51.4 hectares. **Plan 1** also illustrates the portion of the Precinct where the town planning controls are proposed to change via the current Planning Proposal.

1.3 Planning Process to Date

Lismore City Council has completed a series of detailed consultation workshops regarding the Lismore Health Precinct.

Phase 1 – November 2012

A joint design workshop was held between NNSWLHD, the University Centre for Rural Health and Lismore City Council. A 'Resident Focus Group' was also convened as part of the workshop process. This workshop resulted in a number of Goals and Actions being established with the aim of achieving good outcomes for Lismore from the Stage 3 upgrades at LBH. Goals 4 and 5 relate to providing increased opportunities for medium density housing within the Health Precinct.

Goal 4: Affordable housing and accommodation

- Lismore City Council to undertake a review of planning controls, design principles and standards for higher density housing including building height, density, private open space, and on-site car parking.
- Undertake detailed design and feasibility assessment for medium density housing redevelopment at 40-42 McKenzie Street.
- Undertake detailed design and feasibility assessment for student accommodation development on UCRH site.
- Undertake a preliminary investigation into suitable sites for the development of accommodation for hospital visitors (Medihotel) in the area north of Uralba Street.

Goal 5: Planning to enable transformation

- Lismore City Council is to undertake a review of and amend the LEP to:
 - Promote medium density housing development
 - Increase the building height limit to 3 and 4 storeys to enable higher density developments within the precinct.
 - Enable the use of 'sub-zones', to provide clarity on the desired land use and built form outcomes.
- Lismore City Council to collaborate with NNSWLHD to develop a new DCP for the Health Precinct. The DCP should outline the character sought in line with the overall vision and goals captured in the Health Precinct Plan shown in Section 3.2 of this report.

Phase 1 was facilitated by Urbanismplus Ltd. A detailed report documenting the methodologies and outcomes of this workshop is available on Lismore City Council's website at www.lismore.nsw.gov.au (search 'Health Precinct').

Phase 2 – November 2013 and May 2014

In **November 2013**, a 'Housing Intensification Workshop' was convened to address issues associated with achieving Goals 4 and 5. This workshop was attended by a range of Council Officers, representatives of Northern NSW Local Health District, the University Centre for Rural Health, St Vincent's Private Hospital & other health service providers, private and public housing providers and local residents. This workshop recommended that future tasks should include:

- Ongoing community engagement;
- A survey to ascertain demand for medium density housing; and
- A 'Preliminary Viability Test' to help inform housing producers with respect to profitability.

In addition, the Phase 2 workshop identified the need to expand the investigation area to incorporate areas within walking distance of LBH towards the Lismore CBD.

In **May 2014**, a further workshop was held with generally the same attendees as the

November 2013 workshop. This meeting explored the findings of two pieces of work, namely:

- A Demand Survey completed by Nelson Consultancy Pty Ltd; and
- Preliminary Viability Testing completed by Aegis Projects Ltd.

This workshop recommended, in part, that Lismore City Council review the town planning controls for the Health Precinct. This work is to include a review of both the Development Control Plan (DCP) and Local Environmental Plan (LEP).

Phase 2 was also facilitated by Urbanismplus Ltd. A detailed report documenting the methodologies and outcomes of this Phase is available on Council's website at www.lismore.nsw.gov.au (search 'Health Precinct').

Phase 3 - Health Precinct Discussion Paper

Following on from the above, Newton Denny Chapelle (NDC) was engaged by Lismore City Council to undertake investigations with respect to the following:

- a) What changes could be made to the Lismore Local Environmental Plan 2012 (LLEP) and/or Lismore Development Control Plan (LDGP) to:
 - encourage additional specialist medical practices and health support services (such as radiology clinics) to be established within the Health Precinct;
 - encourage additional residential accommodation suitable for visiting medical personnel (such as interns and specialists) and medical students; and
 - encourage higher housing densities to enable more people to reside in a location which is central and accessible to Lismore City Centre and Lismore Square;
- b) What town planning measures can be put in place to protect the amenity of existing and future residents within the Health Precinct, whilst also achieving the above; and
- c) What other 'incentives' are available to Council to encourage redevelopment within the Health Precinct.

The outcomes of these investigations were incorporated into a Discussion Paper, which was placed on public exhibition for a period of 5 weeks in **March and April 2015**. Letters were sent to all land holders in the precinct and notices placed in the 'Local Matters' publication. Two 'face-to-face' consultations were also held where community members could speak with the Project Team regarding the proposed changes to the planning controls.

A copy of the Discussion Paper is provided at **Attachment 1** of this Planning Proposal. A summary of the community comments made regarding the Discussion Paper are provided at **Attachment 2**. In April 2015, Councillors met to discuss the outcomes of the community consultation concerning the Discussion Paper. The discussion at this meeting has informed the proposed changes to the zoning and building height controls contained within this Planning Proposal.

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2. Planning Proposal

Part 1 Objectives and Intended Outcomes

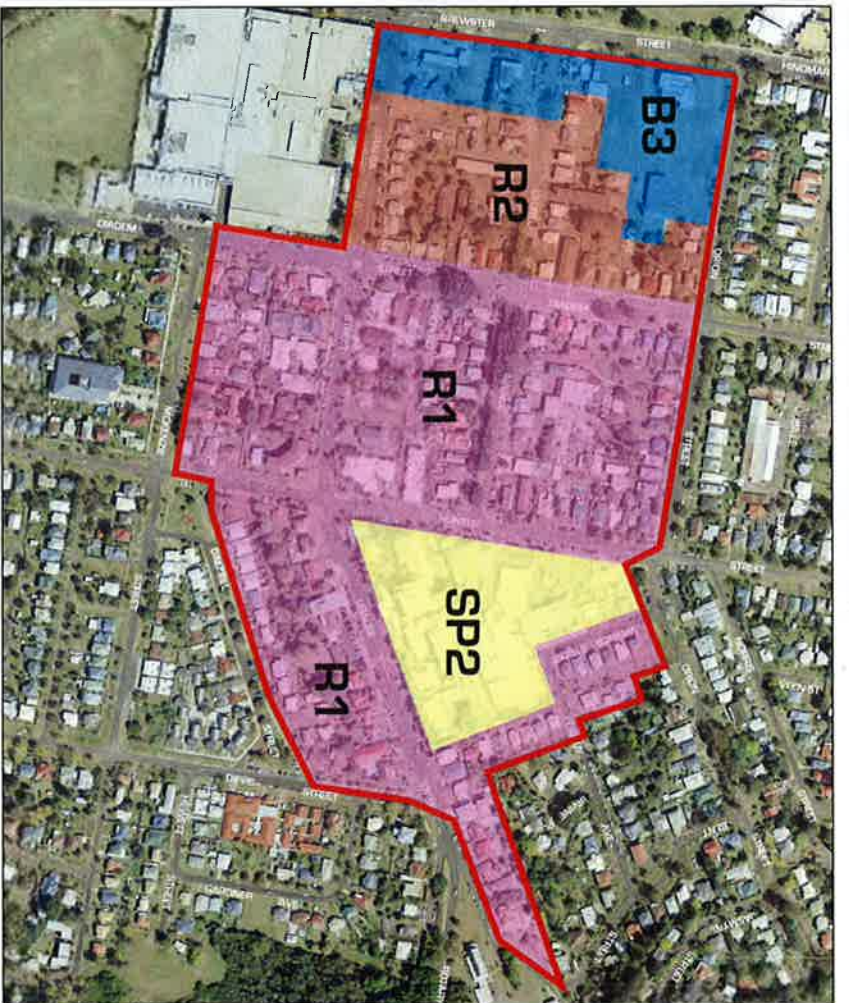
The objective of this Planning Proposal is to change the zoning and building height controls for the Lismore Health Precinct (being the land in the vicinity of Lismore Base Hospital) to encourage additional residential accommodation, specialist medical practices and health support services to be established within the Precinct.

Part 2 Explanation of Provisions

2.1 Proposed Changes to LLEP2012

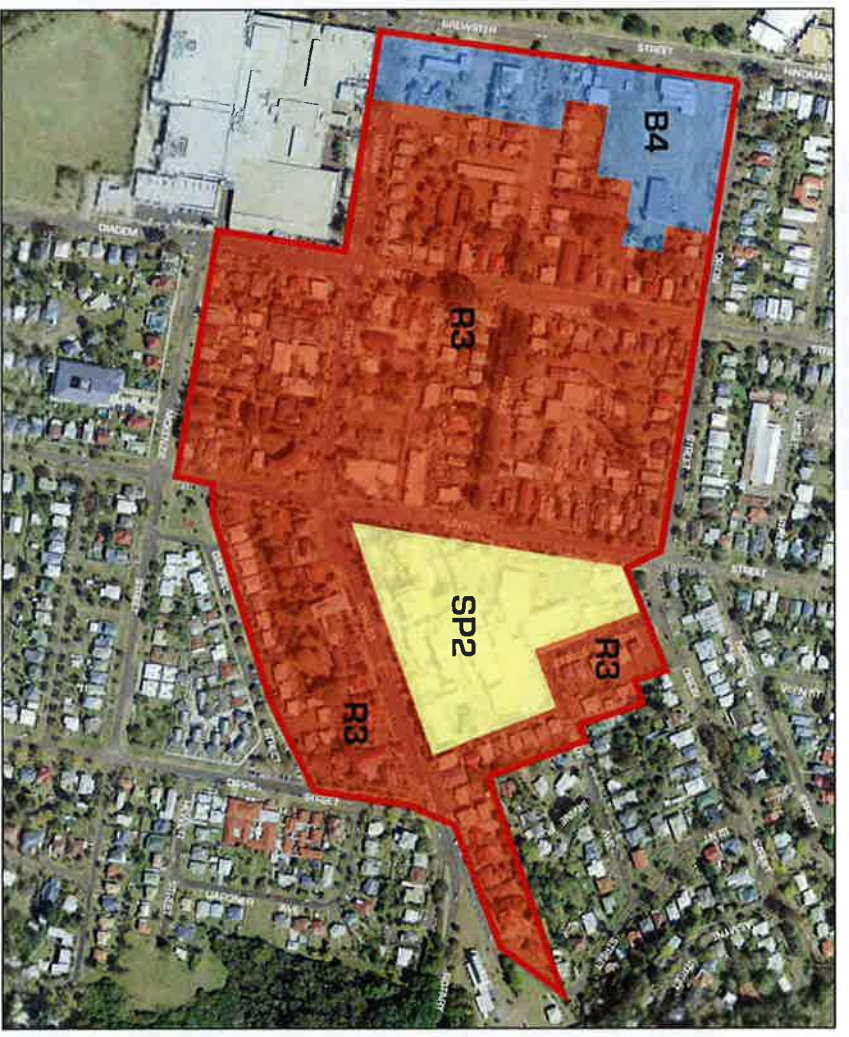
The proposed outcome will be achieved in the following ways:

- Amending the Land Use Table in the Lismore LEP 2012 to introduce the R3 Medium Density Residential Zone. The proposed land use table for the R3 Medium Density Residential Zone is provided within **Section 2.2**.
- Amending the Lismore LEP 2012 Land Zoning Map in accordance with the 'Proposed Zoning' plan provided within **NDC Plan 2**. This involves:
 - a. Changing the zoning for parts of the Precinct currently zoned R1 General Residential Zone to R3 Medium Density Residential Zone; and
 - b. Changing the zoning for the part of the Precinct currently zoned B3 Commercial Core Zone to B4 Mixed Use Zone;
- Amending the Lismore LEP 2012 Building Height Map in accordance with the 'Proposed Building Height Controls' plan provided within **NDC Plan 3**. This involves increasing the building height controls in parts of the Precinct from the current 11.5m, 9m and 8.5m to 16m and 13m.



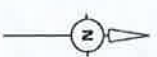
EXISTING ZONING
LISMORE LOCAL ENVIRONMENTAL PLAN 2012

B3	COMMERCIAL CORE	R2	LOW DENSITY RESIDENTIAL
R1	GENERAL RESIDENTIAL	SP2	INFRASTRUCTURE



PROPOSED ZONING
LISMORE LOCAL ENVIRONMENTAL PLAN 2012

B4	MIXED USE	SP2	INFRASTRUCTURE
R3	MEDIUM DENSITY RESIDENTIAL		



REV DATE AMENDMENT

B
C
D
E

SOURCE PLAN: www.maps.six.nsw.gov.au - accessed 08 July 2014

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Newton Denny Chapelle

Surveyors Planners Engineers
Email: office@newdennychapelle.com.au
LISMORE 31 Carrington St, Lismore 2480 PH: 6622 71011
CASINO 100 Barker St, Casino 2470 PH: 6662 5000

PLAN 2 - EXISTING & PROPOSED LAND ZONING MAP

CLIENT: LISMORE CITY COUNCIL
LOCATION: LISMORE HEALTH PRECINCT
DATE: 21.05.15
SCALE: 1:5000 @ A3

REF: 12/397
DRAWN: bk

2.2 Proposed R3 Medium Density Residential Land Use Table

The proposed land use table for the R3 Medium Density Residential Zone is provided below. Text shown in red font is required pursuant to the Standard Instrument LEP (or LEP 'template'). Text shown in black font is additional text proposed for inclusion by Council.

Zone R3 Medium Density Residential

1 Objectives of zone

- To provide for the housing needs of the community within a medium density residential environment.*
- To provide a variety of housing types within a medium density residential environment.*
- To enable other land uses that provide facilities or services to meet the day to day needs of residents.*
- To encourage development within the Lismore Health Precinct which supports and consolidates the services provided by Lismore Base Hospital, including specialist medical practices and health support services.*
- To encourage higher housing densities and greater housing choice within the Lismore Health Precinct.*
- To encourage residential flat developments which are of a high quality design and are compatible with the character and amenity of the surrounding neighbourhood.*

2 Permitted without consent

Environmental protection works; Home-based child care; Home occupations

3 Permitted with consent

Attached dwellings; Boarding houses; Building identification signs; Business identification signs; Child care centres; Community facilities; Dwelling houses; Group homes; Home industries; Hostels; Kiosks; Multi dwelling housing; Neighbourhood shops; Places of public worship; Residential flat buildings; Respite day care centres; Restaurants or cafes; Semi-detached dwellings; Seniors housing; Shop top housing; Roads; Any other development not specified in item 2 or 4

4 Prohibited

Agriculture; Air transport facilities; Airstrips; Amusement centres; Animal boarding or training establishments; Biosolids treatment facilities; Boat building and repair facilities; Car parks; Cemeteries; Charter boating and tourism facilities; Commercial premises; Correctional centres; Crematoria; Depots; Eco-tourist facilities; Entertainment facilities; Farm buildings; Farm stay accommodation; Forestry; Freight transport facilities; Function centres; Heavy industrial storage establishments; Helipads; Highway service centres; Home occupations (sex services); Industrial retail outlets; Industrial training facilities; Industries; Jetties; Marinas; Mooring pens; Moorings; Mortuaries; Passenger transport facilities; Public administration buildings; Recreation facilities (major); Registered clubs; Research stations; Restricted premises; Rural industries; Rural workers' dwellings; Service stations; Sewage treatment plants; Sex services premises; Signage; Storage premises; Transport depots; Truck depots; Vehicle body repair workshops; Vehicle repair stations; Veterinary hospitals; Warehouse or distribution centres; Waste or resource management facilities; Water recycling facilities; Water storage facilities; Water treatment facilities; Wholesale supplies

Part 3 Justification

1. Is the Planning Proposal a result of a strategic study or report?

Yes. As outlined in 'Section 1 – Background', Lismore City Council has completed extensive background studies and community consultations to inform the current Planning Proposal.

2. Is the Planning Proposal the best means of achieving the objectives or is there a better way?

Yes. The Planning Proposal is required in order to change the LEP zoning and height controls within the Precinct. The Discussion Paper at **Attachment 1** provides further information in this regard.

3. Is the Planning Proposal consistent with the objectives and actions of the Far North Coast Regional Strategy?

Yes. The Far North Coast Regional Strategy 2006 identifies Lismore as being a 'Major Regional Centre'. The Strategy advises that 'Lismore will continue as a regional hub for creative industry and cultural activities, education, health, employment and retail' and advises that majority of population growth (in the Lismore LGA) will occur 'in and around Lismore'. The proposed changes to the planning controls in the Health Precinct directly support these provisions.

4. Is the Planning Proposal consistent with the Council's local strategy or local strategic plan.

Ten Year Objectives

- To have ~~all~~ the health providers in Lismore work in coordination to meet the health care needs of the Lismore community

Four Year Objectives

- The planning of the Lismore Health Precinct is complete and implementation of the project is proceeding to schedule
- Completion of the Fit for School project
- Completion of the Community Services Hub project

Community Vision: Affordable health

With an ageing population and an ever-expanding increase in the cost of health care, this vision has never been more important. Lismore is a regional centre and is lucky enough to have both large public and private hospitals and associated specialist and allied health providers. We are in an excellent position to build on our existing infrastructure to make this vision a reality.

Key initiatives

The key initiative for the vision is the Lismore Health Precinct. The details of the project can be found in the Partnering Strategy.

In addition we will continue to facilitate and develop partnering projects with the health and education sector to assist in the coordination of health services to the Lismore community. The short- to medium-term projects are the Fit for School and Community Services Hub projects. The details of both these projects can be found in the Partnering Strategy.

Yes. The Planning Proposal is directly consistent with both the 'Imagine Lismore' 10 Year Plan 2013 – 2023 and with Council's Growth Management Strategy adopted in May 2015. In this regard, Imagine Lismore contains a Community Vision relating to 'Affordable Health'. The Lismore Health Precinct project is identified as the 'key initiative' to achieve the vision. Imagine Lismore also contains a vision relating to affordable housing. The provision of increased housing density in the proximity to the Lismore Town Centre is included within the initiatives to achieve the vision of affordable housing.

With respect to the Growth Management Strategy, this document includes the following provision:

5.2.3 Medium Density Housing Precinct

Section 2.4 shows that Lismore's housing stock is dominated by detached single houses with only 12.8% of housing in the LGA being medium density, although the proportion in urban Lismore is higher at 19.1%. The Lismore LEP supports the community's desire for an increased diversity of housing by nominating a 400m² minimum lot size for subdivision in the general residential zone and permitting dual occupancy, residential flat buildings and secondary dwellings. Despite this, the rate of provision of alternative housing types has been low.

Council considers that nominating an area as a preferred precinct for medium density housing will act as signal to the development industry, provide certainty

to the community about the built form of the housing, and demonstrate good quality housing outcomes. The area close to the Base Hospital is ideally located for an increase in the density of residential development to take advantage of its close proximity to the Hospital, the CBD, Lismore Square and open space and recreation facilities...

Council has received funding from the Department of Planning and Environment through the Planning Reform Fund to undertake the above review with an explicit aim being the promotion of medium density housing development, including consideration of increasing the building height limit to 3 and 4 storeys to enable higher density developments within the precinct. The application of alternative zones to provide clarity on the desired land use and built form outcomes will also be considered..."

5. Is the Planning Proposal consistent with applicable State Environmental Planning Policies?

Comment: The Planning Proposal is consistent with the provisions of applicable State Environmental Planning Policies. An assessment of the project against these policies is provided at **Attachment 3**.

6. Is the Planning Proposal consistent with applicable Ministerial Directions [s117 Directions]?

Comment: The Planning Proposal is consistent with the provisions of applicable S117 Ministerial Directions. An assessment of the project against these requirements is provided at **Attachment 4**.

7. Is there any likelihood that critical habitat or threatened species, populations or ecological communities or their habitats will be adversely affected as a result of the proposal?

Comment: The Health Precinct is already developed for urban purposes and does not exhibit significant environmental values. Accordingly, no impacts are envisaged with respect to critical habitat or threatened species, populations or ecological communities or their habitats.

8. Are there any other likely environmental effects as a result of the planning proposal and how are they proposed to be managed.

Comment: No specific environmental impacts are expected as the result of the Planning Proposal. A Development Control Plan (DCP) will be introduced concurrent with the changes to the LEP. The DCP will establish detailed design controls with the aim of ensuring that development occurs in a manner which is compatible with the existing built form and character of the locality. The proposed DCP will be placed on exhibition concurrent with the draft Planning Proposal.

9. Has the planning proposal adequately addressed any social and economic effects?

Comment: The proposed changes to the planning controls will enable development applications to be lodged for more intensive forms of development within the Lismore Health Precinct than is currently the case. Council will continue to monitor development 'take-up' rates within the Precinct and review demands for social services as required.

The Precinct is not identified as a Heritage Conservation Area. One Item of Local Environmental Heritage is located within the broader Health Precinct Investigation Area. This Item is not located within the area to which the current Planning Proposal relates.

10. Is there adequate public infrastructure for the planning proposal.

Comment: Council advises that adequate service infrastructure is in place to service the intensification of development within the Health Precinct. Council will continue to monitor development 'take-up' rates within the Precinct and adjust servicing plans as required.

11. What are the views of state and Commonwealth public authorities consulted in accordance with the Gateway Determination?

Comment: To be completed following receipt of the Gateway Determination.

We note that both NNSWLHD and NSW Housing have been closely involved with, and are supportive of, Council's consultation processes to date (as outlined in Section 1.3).

Part 4 Mapping

The following changes are proposed to the mapping within the Lismore Local Environmental Plan 2012

i. Land Zoning Map

NDC Plan 2 illustrates the existing and proposed zoning framework pursuant to the Lismore Local Environmental Plan 2012.

ii. Building Height Map

NDC Plan 3 illustrates the existing and proposed building height controls pursuant to the Lismore Local Environmental Plan 2012.

Part 5 Community Consultation

A. Community Consultation

As outlined in Part 1.3, Lismore City Council has already completed extensive community consultation related to the proposed changes to the planning controls in the Lismore Health Precinct.

In addition, it is expected that the Planning Proposal will be exhibited for a period of 28 days in accordance with standard procedures.

B. Agency Consultation

It is expected that the Gateway Determination may require consultation with NNSWLHD and NSW Housing.

Part 6 Project Timeline

Plan Making Step	Estimated Completion
Council Resolution	11 August 2015
Gateway Determination (Anticipated)	End August 2015
Government Agency Consultation	Concurrent with public exhibition
Public Exhibition Period	September 2015
Submissions Assessment	October 2015
Council adopt Planning Proposal	November 2015
Submission of Endorsed LEP to DP&I for finalisation	November 2015
Anticipated date plan is made (if delegated)	December 2015
Forwarding of LEP Amendment to DP&I for notification (if delegated)	December 2015

REFERENCES

A Guide to Preparing Planning Proposals NSW Planning and Infrastructure 2012.



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ATTACHMENT 1

Discussion Paper

Discussion Paper

Review of Town Planning Controls for the
Lismore Health Precinct

ON BEHALF OF
LISMORE CITY COUNCIL

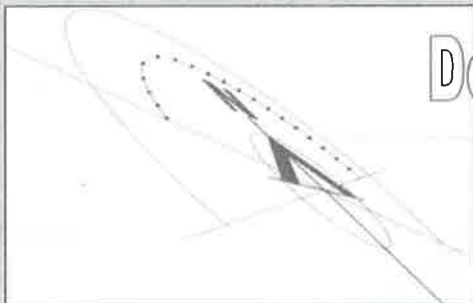
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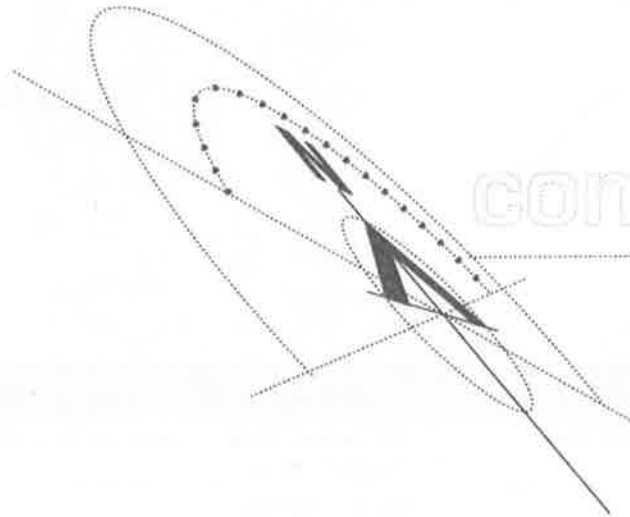
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- Plan 7 – Existing Height Controls
- Plan 8 – Proposed Height Controls
- Indicative Building Forms

Executive Summary

In recent years, Lismore City Council (LCC) has undertaken a range of consultations and technical investigations aimed at supporting health services in the City, with particular focus on the Lismore Health Precinct (LHP) in the vicinity of Lismore Base Hospital.

Newton Denny Chapelle (NDC) have been engaged by LCC to provide recommendations with respect to potential changes to Council's town planning controls which will help encourage and support health related activities within the Health Precinct. This project is being funded via a Planning Reform Fund Grant received from the NSW Department of Planning and Environment.

This report recommends a number of changes to the zoning, building height and other planning controls within the Precinct. These changes are summarised below:

- Introducing the R3 Medium Density Residential Zone into the Lismore LEP 2012 (LLEP), with the planning objectives for this zone focussed on providing accommodation, health and education related land uses. It is proposed that this zone will be applied to key areas within the Precinct – particularly those in close proximity to the hospital and/or those residential areas which currently contain a relatively high proportion of non-residential activities. This zoning would be supported by an increase in building heights in these areas.
- Applying the B4 Mixed Use Zone to those parts of the Precinct currently zoned B3 Commercial Core Zone and increasing the permissible building heights.
- Changing the zoning of the land currently zoned R2 Low Density Residential Zone to either R3 Medium Density Zone or B4 Mixed Use Zone and increasing the permissible building heights.
- Retention of the existing R1 General Residential Zoning for the parts of the Precinct which currently retain a strong residential character and which are not located in key areas identified for future development. No changes to other town planning controls are proposed within these areas.

The changes to zoning and building height controls within the Local Environmental Plan (LEP) will be supported by the introduction of detailed design requirements into the Development Control Plan (DCP). These provisions will focus on encouraging good urban design outcomes, with a particular focus on protecting residential amenity.

A series of diagrams and photographic plates are provided within this report which illustrate the potential scale and form of development which will be permissible should the proposed changes to the planning controls be introduced by Council.

This report will form the basis of consultation with the local community. Following completion of this process, Council will decide whether or not it wishes to formally commence the technical processes involved with amending the town planning controls within the Health Precinct.

Background

Section

1

1.1 Introduction & Purpose of Report

The health sector is the largest employment sector in the Lismore Local Government Area (LGA). The Australian Bureau of Statistics advises that in 2011 approximately 17.6% of the workforce was employed in health care and social assistance related jobs.

In recent years, Lismore City Council (LCC) has undertaken a range of consultations and technical investigations aimed at supporting health services in the LGA, with particular focus on the Lismore Health Precinct (LHP) in the vicinity of Lismore Base Hospital. This work has highlighted a demand for additional accommodation within close proximity to the hospital. These investigations have occurred in parallel with work undertaken by NSW Health to develop a new Master Plan for the Hospital.

In addition, the Lismore Housing Strategy 2012 identified the need for additional infill housing within areas that are close to shops, community services, employment and transport options. The Strategy also identified the need for a greater mix of housing types including an increase in the available supply of 1 and 2 bedroom units.

Newton Denny Chapelle (NDC) have been engaged to provide recommendations with respect to potential changes to Council's town planning controls which will help encourage and support health related activities within the Health Precinct. This project is being funded via a Planning Reform Fund Grant received from the NSW Department of Planning and Environment.

1.2 Defining the Health Precinct

Lismore City Council has defined the Health Precinct as comprising the area surrounding the Lismore Base Hospital, generally as bounded by:

- Brewster Street to the west;
- Leycester and Orion Streets to the north;
- Hunter Street, Bent Street and Rotary Park Reserve to the east; and
- McKenzie Street and Uralba Street to the south.

Plan 1 provides a Locality Plan for the Precinct. The Precinct has an area of approximately 51.4 hectares.

The Precinct is centred on the Lismore Base Hospital (LBH). LBH is a regional referral, Level 5 Base Hospital which provided care to approximately 29,450 patients between 2011/2013. The Hospital acts as a drawcard for a range of health professionals. The hospital is expected to experience significant expansion in the short to medium term via the Stage 3A and 3B upgrades.

In addition to providing land uses ancillary to the Hospital, the Precinct is located in relatively close proximity to the Lismore City Centre and Lismore Square as well as a range of recreation and sporting facilities.

1.3 Planning Process to Date

Lismore City Council has completed a series of detailed consultation workshops regarding the Lismore Health Precinct. These workshops have been facilitated by Urbanismplus Ltd. Detailed reports documenting the methodologies and outcomes of these workshops have been prepared and are available on Council's website at www.lismore.nsw.gov.au (search 'Health Precinct'). This process is summarised as follows:

Phase 1 – November 2012

A joint design workshop was held between NSW Health, the University Centre for Rural Health and Lismore City Council. A 'Resident Focus Group' was also convened as part of the workshop process. This workshop resulted in a number of Goals and Actions being established with the aim of achieving good outcomes for Lismore from the Stage 3 upgrades at LBH. Goals 4 and 5 relate to providing increased opportunities for medium density housing within the Health Precinct.

Goal 4: Affordable housing and accommodation

- Lismore City Council to undertake a review of planning controls, design principles and standards for higher density housing including building height, density, private open space, and on-site car parking.
- Undertake detailed design and feasibility assessment for medium density housing redevelopment at 40-42 McKenzie Street.
- Undertake detailed design and feasibility assessment for student accommodation development on UCRH site.
- Undertake a preliminary investigation into suitable sites for the development of accommodation for hospital visitors (Medihotel) in the area north of Uralba Street.

Goal 5: Planning to enable transformation

- Lismore City Council is to undertake a review of and amend the LEP to:
 - Promote medium density housing development
 - Increase the building height limit to 3 and 4 storeys to enable higher density developments within the precinct.
 - Enable the use of 'sub-zones', to provide clarity on the desired land use and built form outcomes.
- Lismore City Council to collaborate with NNSWLHD to develop a new DCP for the Health Precinct. The DCP should outline the character sought in line with the overall vision and goals captured in the Health Precinct Plan shown in Section 3.2 of this report.

Phase 2 – November 2013 and May 2014

In **November 2013**, a 'Housing Intensification Workshop' was convened to address issues associated with achieving Goals 4 and 5. This workshop was attended by a range of Council Officers, representatives of Northern NSW Local Health District, the University Centre for Rural Health, St Vincent's Private Hospital & other health service providers, private and public housing providers and local residents. This workshop recommended that future tasks should include:

- Ongoing community engagement;
- A survey to ascertain demand for medium density housing; and
- A 'Preliminary Viability Test' to help inform housing producers with respect to profitability.

In addition, the Phase 2 workshop identified the need to expand the investigation area to incorporate areas within walking distance of LBH towards Lismore CBD.

In **May 2014**, a further workshop was held with generally the same attendees as the November 2013 workshop. This meeting explored the findings of two pieces of work – namely:

- A Demand Survey completed by Nelson Consultancy Pty Ltd; and
- Preliminary Viability Testing completed by Aegis Projects Ltd.

This workshop recommended, in part, that Lismore City Council review the town planning controls for the Health Precinct. This work is to include a review of both the Development Control Plan (DCP) and Local Environmental Plan (LEP).

1.4 Key Issues to be Explored

Whilst the above process has resulted in a wide range of information and recommendations, key matters to be considered within this Discussion Paper are as follows:

- a) What changes could be made to the Lismore Local Environmental Plan 2012 (LLEP) and/or Lismore Development Control Plan (LDGP) to:
 - encourage additional specialist medical practices and health support services (such as radiology clinics) to be established within the Health Precinct;
 - encourage additional residential accommodation suitable for visiting medical personnel (such as interns and specialists) and medical students; and
 - encourage higher housing densities to enable more people to reside in a location which is central and accessible to Lismore City Centre and Lismore Square.
- b) What town planning measures can be put in place to protect the amenity of existing and future residents within the Health Precinct, whilst also achieving the above.
- c) What other 'incentives' are available to Council to encourage redevelopment within the Health Precinct.

Existing Site Conditions

Section 2

2.1 Introduction

The Lismore Health Precinct contains a range of topographic conditions – from the elevated, sloping landform surrounding the Hospital, to the flat, low-lying landform of the floodplain in the western portion of the Precinct. The existing built form and development characteristics also varies significantly within the Precinct. These characteristics are described below and illustrated into the following plans:

- **Plan 2** – Existing Site Conditions;
- **Plan 3** – Sub-Precincts; and
- **Plans 4 A-D** – Photographic Plates.

For the purpose of this analysis, the Health Precinct has been divided into a number of Sub-Precincts as described below.

2.2 Western Sub-Precinct

The Western Sub-Precinct (located between Brewster Street and Diadem Street) is generally flat with a regular grid pattern street network. The area is located in close proximity to key attractions such as Lismore City Centre and Lismore Square. This area is flood prone and development needs to comply with Council's flood planning requirements. Typically, this has resulted in habitable areas being elevated above flood level, with lower areas used for car parking and storage.

The westernmost portion of the Sub-Precinct is currently zoned B3 Commercial Core and therefore contains a number of commercial premises fronting Brewster Street. Properties fronting Brewster Street have views over a large sporting field area. This area has a number of relatively large allotments which are either vacant or relatively underdeveloped.

The eastern portion of the Sub-Precinct is currently zoned R2 Low Density Residential Development, in recognition of the flood characteristics of the site. This area is characterised by older style elevated dwellings, with few non-residential or health related activities.

Given the existing topography, development pattern and proximity of the Sub-Precinct to the Lismore Town Centre, this area is suited to a more intensive built form than that which is currently permitted in the locality. It is therefore considered appropriate that the planning controls for the western Sub-Precinct be changed to facilitate a more intensive form of development than that which is currently permitted. This report therefore recommends changes to both the zoning and building height controls in this area as follows:

- Applying the B4 Mixed Use Zone to those parts of the Precinct currently zoned B3 Commercial Core Zone and increasing the permissible building heights; and
- Changing the zoning of the land currently zoned R2 Low Density Residential Zone to either R3 Medium Density Zone or B4 Mixed Use Zone and increasing the permissible building heights.

2.3 Central Sub-Precinct

The central portion of the Precinct is focussed on Laurel Avenue and bounded by Diadem Street, Orion Street, Hunter Street and Uralba Street. This area is generally flood-free and has undergone a greater level of redevelopment and adaptive re-use than the lower-lying areas in the Western Sub-Precinct. Laurel Avenue is dominated by large Fig trees which provide a strong feature in the landscape. Uralba Street acts as a key transport route accessing the Lismore Town Centre.

The Hospital Campus is located directly to the east (up-hill) of this Sub-Precinct. As such, the area contains a relatively high proportion of buildings converted to health practices and other health related land uses. The existing development pattern reflects the role of this area as the 'heart' of the Health Precinct and provides an indication that this area may be suitable for more intensive land uses.

Whilst development has occurred under the current planning framework, it is considered that it would be appropriate to ensure that the zoning and development framework accurately reflects Council's planning intentions for the Precinct. As such, this report recommends the introduction of a new zone (nominally the R3 Medium Density Residential Zone) for this area and an increase in permissible building heights to and equivalent of 3 storeys (13m).

2.4 Hospital Sub-Precinct

The Lismore Base Hospital is located in an elevated position on a ridgeline and represents the dominant built form within the landscape, with existing buildings on site having heights up to approximately 13m. The Stages 3A and 3B upgrades to the Hospital will provide for a further intensification in built form on the campus. This report does not consider changes to the current planning controls for the Hospital Campus.

2.5 Uralba Street/Dalziell Street Precinct

This Precinct is located directly opposite the main entry to Lismore Base Hospital. Uralba Street in this locality is dominated by health practices as well as the University Centre for Rural Health. Dalziell Street is currently characterised by relatively low density residential land uses.

This site is located directly opposite the main hospital entrance and represents a key

future development site for the Health Precinct. In this regard, a large number of land parcels within this Precinct are owned either by the NSW Department of Housing or Sydney University. Discussions with the University have revealed that development plans include a large car park (built in conjunction with NSW Health), accommodation, education facilities, health practices and office functions related to the University and its research partners.

There is a significant change in elevation between Dalziell Street and Uralba Street. This elevation change is such that it provides a substantial backdrop to the buildings fronting Dalziell Street. This backdrop is visually capable of accommodating a substantial built form (subject to detailed design). However, any larger scale development would need to provide an appropriate transition to the existing low density residential land uses located to the south.

Given the above, this report recommends the introduction of a new zone (nominally the R3 Medium Density Residential Zone) for this area and an increase in permissible building heights to enable a 5 level structure in the central portion of the site with 3 storey (13m) limits to the street frontages. Note: Building height controls in the LEP relate to the highest measured from 'ground level existing'. Given the change in elevation in this sub-precinct, a substantial built form is achievable by use of excavation which means that a future building is able to achieve 5 levels with only 3 of these levels projecting above ground level.

2.6 Eastern Sub-Precinct

The eastern part of the Precinct (including the Fermoy Avenue/Bent Street area and the Gardner Avenue/Hewett Street locality) is generally characterised by elevated, sloping topography. The topography results in an irregular street pattern (unlike the uniform grid pattern in the western portions of the Precinct). Rotary Park provides a significant vegetated backdrop to this area.

Whilst the Sub-Precinct is located in close proximity to the Hospital, it is relatively removed from other attractions in the area (such as Lismore Square). It retains a distinctly low density residential character, with the dominant built form comprising one

and two storey dwelling houses. The southern portion of the Sub-Precinct (in the vicinity of Dibbs Street) contains several one and two storey townhouse developments as well as the former Maranoa facility.

Given the topographic characteristics and existing built form, it is considered appropriate to retain the existing development framework for the majority of this area. Redevelopment will still be permissible with development consent, however would be limited to the same scale as currently permitted by the LEP. There are, however, two areas within the Sub-Precinct which warrant a change in planning controls:

- **Weaver Street** – Weaver Street is located directly opposite the Hospital Campus. The built form is currently older style detached dwellings situated on regular, rectangular shaped allotments. Given the direct interface with the hospital, the properties currently have relatively poor residential amenity. They are, however, well suited to providing health related land uses. As such, it is recommended that this area be allocated the R3 Medium Density Zone and a height limit equivalent to 3 storeys (13m).
- **Uralba Street** – Uralba Street is a main traffic thoroughfare for Lismore. It is currently characterised by a range of health services as well as student accommodation. It is recommended that this area also be allocated the R3 Zone and a height limit equivalent to 3 storeys (13m).

2.7 Northern Sub-Precinct

This Sub-Precinct is located to the north of Orion Street. This area comprises predominately older style detached dwellings. These dwellings are typically elevated with storage/garages beneath one level of accommodation.

Given the existing built form, and relative remoteness from the key attractions within the Precinct, it is considered appropriate to retain the existing planning framework for this area. Redevelopment will still be permissible with development consent, however would be limited to the same scale as currently permitted by the LEP.

We note that there are two large non-residential sites fronting Jubilee Street (namely

the former Telstra depot site and the Singh Carpentry business] which would appear to present redevelopment opportunities in the future. These properties will be able to develop in accordance with the existing planning controls applying to the land. Future development on these sites may be able to seek variations to the applicable development standards where there are sufficient environmental planning grounds to justify contravening the development standard. Any future application/s will require careful regard to be had with respect to the relationship to existing dwellings backing onto the properties. Given past and current uses, an assessment of the soil conditions will also be required to ensure that there are no soil contamination issues.



LEGEND
— INVESTIGATION AREA

REV	DATE	AMENDMENT
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B		
C		
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PLAN 1 - LISMORE HEALTH PRECINCT INVESTIGATION AREA

CLIENT: LISMORE CITY COUNCIL

LOCATION: LISMORE HEALTH PRECINCT

REVIEW OF TOWN PLANNING CONTROLS

DATE: 23 July 2014

REF: 12/397

SCALE: 1:5000 @ A4



Newton Denny Chapelle

Surveyors Planners Engineers

Email: office@newtondennychapelle.com.au

LISMORE 31 Carrington St. Lismore 2480 PH 6522 1011

CASINO 100 Barker St. Casino 2470 PH 6562 5000

SOURCE PLAN: www.maps.six.nsw.gov.au - accessed 08 July 2014

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REV DATE AMENDMENT

A B C D E

PLAN 2 - EXISTING SITE CONDITIONS

CLIENT: LISMORE CITY COUNCIL

LOCATION: LISMORE HEALTH PRECINCT

REVIEW OF TOWN PLANNING CONTROLS

DATE: 23 July 2014

REF: 12/397

SCALE: 1:5000 @ A4

Newton Denny Chapelle

Surveyors Planners Engineers

Email: office@newtondennychapelle.com.au

LISMORE 31 Carrington St. Lismore 2480 PH 6622 1011

CASINO 100 Barker St. Casino 2470 PH 6662 5000

SOURCE PLAN: <http://mapping.lismore.nsw.gov.au/Exponare> - accessed 31 July 2014

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PLAN 3 - LISMORE HEALTH PRECINCT SUB PRECINCTS

CLIENT: LISMORE CITY COUNCIL

LOCATION: LISMORE HEALTH PRECINCT

REVIEW OF TOWN PLANNING CONTROLS

DATE: 23 JULY 2014

REF: 12/397
DRAWN: BK



Newton Denny Chapelle

Surveyors Planners Engineers

Email: office@newtondennychapelle.com.au

LISMORE 31 Carrington St. Lismore 2480 PH. 6622 1011

CASINO 100 Barker St. Casino 2470 PH. 6662 5000

SOURCE PLAN: www.maps.six.nsw.gov.au - accessed 08 July 2014

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SOURCE PLAN: www.maps.six.nsw.gov.au - accessed 08 July 2014
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Newton Denny Chapelle

Surveyors Planners Engineers
 Email: offices@newtondennychapelle.com.au
 LISMORE 31 Carrington St. Lismore 2480 PH 6622 1011
 CASINO 100 Barker St. Casino 2470 PH 6662 5000

PLAN 4a - PHOTOGRAPHIC PLATES

CLIENT: LISMORE CITY COUNCIL
 LOCATION: LISMORE HEALTH PRECINCT
 REVIEW OF TOWN PLANNING CONTROLS
 DATE: 23 July 2014
 SCALE: 1:5000
 REF: 12/397
 DRAWN: bk



REV	DATE	AMENDMENT
1	01/01/2020	Initial Issue
2	01/01/2021	Amendment 1
3	01/01/2022	Amendment 2
4	01/01/2023	Amendment 3
5	01/01/2024	Amendment 4
6	01/01/2025	Amendment 5
7	01/01/2026	Amendment 6
8	01/01/2027	Amendment 7
9	01/01/2028	Amendment 8
10	01/01/2029	Amendment 9
11	01/01/2030	Amendment 10
12	01/01/2031	Amendment 11
13	01/01/2032	Amendment 12
14	01/01/2033	Amendment 13
15	01/01/2034	Amendment 14
16	01/01/2035	Amendment 15
17	01/01/2036	Amendment 16
18	01/01/2037	Amendment 17
19	01/01/2038	Amendment 18
20	01/01/2039	Amendment 19
21	01/01/2040	Amendment 20
22	01/01/2041	Amendment 21
23	01/01/2042	Amendment 22
24	01/01/2043	Amendment 23
25	01/01/2044	Amendment 24
26	01/01/2045	Amendment 25
27	01/01/2046	Amendment 26
28	01/01/2047	Amendment 27
29	01/01/2048	Amendment 28
30	01/01/2049	Amendment 29
31	01/01/2050	Amendment 30
32	01/01/2051	Amendment 31
33	01/01/2052	Amendment 32
34	01/01/2053	Amendment 33
35	01/01/2054	Amendment 34
36	01/01/2055	Amendment 35
37	01/01/2056	Amendment 36
38	01/01/2057	Amendment 37
39	01/01/2058	Amendment 38
40	01/01/2059	Amendment 39
41	01/01/2060	Amendment 40
42	01/01/2061	Amendment 41
43	01/01/2062	Amendment 42
44	01/01/2063	Amendment 43
45	01/01/2064	Amendment 44
46	01/01/2065	Amendment 45
47	01/01/2066	Amendment 46
48	01/01/2067	Amendment 47
49	01/01/2068	Amendment 48
50	01/01/2069	Amendment 49
51	01/01/2070	Amendment 50
52	01/01/2071	Amendment 51
53	01/01/2072	Amendment 52
54	01/01/2073	Amendment 53
55	01/01/2074	Amendment 54
56	01/01/2075	Amendment 55
57	01/01/2076	Amendment 56
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67	01/01/2086	Amendment 66
68	01/01/2087	Amendment 67
69	01/01/2088	Amendment 68
70	01/01/2089	Amendment 69
71	01/01/2090	Amendment 70
72	01/01/2091	Amendment 71
73	01/01/2092	Amendment 72
74	01/01/2093	Amendment 73
75	01/01/2094	Amendment 74
76	01/01/2095	Amendment 75
77	01/01/2096	Amendment 76
78	01/01/2097	Amendment 77
79	01/01/2098	Amendment 78
80	01/01/2099	Amendment 79
81	01/01/2100	Amendment 80
82	01/01/2101	Amendment 81
83	01/01/2102	Amendment 82
84	01/01/2103	Amendment 83
85	01/01/2104	Amendment 84
86	01/01/2105	Amendment 85
87	01/01/2106	Amendment 86
88	01/01/2107	Amendment 87
89	01/01/2108	Amendment 88
90	01/01/2109	Amendment 89
91	01/01/2110	Amendment 90
92	01/01/2111	Amendment 91
93	01/01/2112	Amendment 92
94	01/01/2113	Amendment 93
95	01/01/2114	Amendment 94
96	01/01/2115	Amendment 95
97	01/01/2116	Amendment 96

SOURCE PLAN: www.maps.six.nsw.gov.au - accessed 08 July 2014

PLAN 4b - PHOTOGRAPHIC PLATES

CLIENT: LISMORE CITY COUNCIL

LOCATION: LISMORE HEALTH PRECINCT

REVIEW OF

DATE: 23 JULY 2014
SCALE: 1:5000 @ A4

 **Newton Denny Chapelle**

Surveyors Planners Engineers

Email: office@newtondennychapelle.com.au

CASINO 100 Barker St. Casino 2470 PH. 6662 5000

14th October 1994



REV DATE AMENDMENT

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SOURCE PLAN: www.maps.six.nsw.gov.au - accessed 08 July 2014
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Newton Denny Chapelle

Surveyors Planners Engineers
Email: office@newtondennychapelle.com.au
LISMORE 31 Carrington St. Lismore 2480 Ph: 6622 1011
CASINO 100 Barker St. Casino 2470 Ph: 6652 5000

PLAN 4d - PHOTOGRAPHIC PLATES

CLIENT: LISMORE CITY COUNCIL

LOCATION: LISMORE HEALTH PRECINCT
REVIEW OF TOWN PLANNING CONTROLS

DATE: 23 July 2014
SCALE: 1:5000 @ A4

REF: 12/397
DRAWN: bk

Town Planning Framework

Section 3

3.1 Key Town Planning Documents

3.1.1 Introduction

The current town planning controls for the Health Precinct are contained within a range of planning documents prepared by both Council and the State Government. The main planning controls are contained within the following documents:

A. Lismore Local Environmental Plan 2012

Lismore Local Environmental Plan 2012 (the LEP) is a legal document which establishes the key development parameters for land within the Lismore LGA. It deals with matters such as land use zoning, permissible land uses and maximum building heights. The provisions of the LEP are generally relatively 'fixed' – that is, in most instances it is not possible for a development application to substantially vary the provisions of an LEP.

B. Lismore Development Control Plan 2012

Lismore Development Control Plan 2012 (the DCP) establishes detailed planning controls relating to matters such as:

- building setbacks;
- landscaping requirements;
- car parking requirements;
- stormwater management; and
- flood planning controls.

These controls are Council 'policy' and are able to provide for flexibility and merit based assessment. The DCP does not currently recognise Council's desired planning outcome for the Health Precinct.

C. State Environmental Planning Policy Infrastructure 2007 (ISEPP)

State Environmental Planning Policy Infrastructure 2007 (ISEPP) is a State government policy which establishes approval frameworks for infrastructure (including health facilities) in NSW. ISEPP over-rides local planning regulations. Importantly, ISEPP allows health services to be permissible with development consent in prescribed areas.

D. State Environmental Planning Policy – Housing for Seniors and People with a Disability (Seniors Living SEPP)

The Seniors Living SEPP enables a range of residential land uses to occur on residential land which is located such that it has suitable access to services and where topography enables disabled access to be achieved. Housing built pursuant to the SEPP must be occupied by seniors or people with a disability although family members and carers are also permitted. Some parts of the Precinct meet the criteria documented in the SEPP.

E. State Environmental Housing Policy – Affordable Rental Housing (Affordable Housing SEPP)

Similar to the Seniors Living SEPP, the Affordable Housing SEPP enables a range of additional residential forms to be developed, provided that certain criteria can be met. Housing built pursuant to the SEPP must be managed so that it is available as available housing for persons on lower incomes in accordance with certain criteria.

3.2 Existing & Proposed Town Planning Controls

3.2.1 Introduction

Following a review of the applicable town planning documents, it is considered that the following key planning criteria impact on the goal of increasing residential development densities within the Health Precinct:

- Zoning and Permissible Land Uses;
- Building Height;

- Residential Design Controls;
- Flood Planning Requirements; and
- Car Parking.

These matters are discussed below.

3.2.2 LEP Zoning & Land Use Permissibility

Zoning and land use permissibility are primarily managed via the Lismore Local Environmental Plan 2012. **Plan 5** illustrates the current zoning framework, whilst **Plans 6a and 6b** illustrate options for changes to the zoning framework as recommended by this Report. A discussion regarding the rational for the proposed zone changes is provided below.

A. SP2 – Infrastructure (Hospital);

The SP2 – Infrastructure Zone applies to the Hospital Campus. The land use table enables the future upgrade and development of the Hospital. No changes are required to this element of the LEP to facilitate Council's desired planning outcome for the Health Precinct.

B. R1 General Residential Zone;

The majority of the Health Precinct is currently zoned R1 General Residential Zone pursuant to the LEP. As illustrated in **Table 1**, almost all land uses considered desirable in the Health Precinct (the notable exception being a stand-alone 'car park') are currently permissible with development consent in the R1 Zone. Accordingly, it is open to Council to retain the existing zoning framework in the residential areas of the Precinct.

Table 1

Land Use	R1 General Residential Zone
Car Park	x
Dwelling House	✓
Dual Occupancy	✓
Multi Dwelling Housing (Town House)	✓
Shop Top Housing	✓

Residential Flat Building	✓
Hotel or Motel Accommodation	✓
Health Consulting Rooms (within a dwelling house)	✓
Health Services Facilities (incl. hospitals, day surgeries, GP & specialist clinics, dentists, radiology facilities, physio therapists, naturopaths and the like)	✓ (also via ISEPP)
Neighbourhood Shops	✓
Restaurant or Cafe	✓

However, the R1 Zone is a 'general' residential zone which is applied throughout almost all of the residential areas of Lismore and Goonellabah. As such, there are no clear planning indicators that a different (and more intensive) development outcome is desired and encouraged within parts of the Health Precinct.

Accordingly, it may be appropriate to consider introducing a specific zone (nominally the 'R3 Medium Density Residential' Zone) into the LEP for those portions of the Precinct where more intensive development is considered appropriate. Adjustments would also be made to the Height of Buildings Map to accommodate greater development opportunities in these areas.

Plans 6A and 6B illustrate the areas considered suitable for the application of the R3 Medium Density Residential Zone. These areas are typically those parts of the Precinct which are accessible to key attractions within or adjacent to the Precinct (such as the Hospital and Lismore Square) and already contain a relatively high proportion of non-residential uses. Those areas which are further removed from key locations and/or are dominated by low density residential development are proposed to retain the existing R1 zoning.

It is envisaged that the list of permitted land uses within the R3 zone would be largely the same as that currently in place for the R1 Zone. However, the land use table would include a number of specific planning objectives relating to achieving the desired development outcome within the Precinct including:

- intensification of dwelling density;
- provision of health services facilities; and
- encouraging health related education facilities.

The land use table will need to be structured to ensure that 'car parks' are permissible with consent in the zone. Investigations will also need to occur with respect to ensuring ancillary office related activities can occur within the Uralba/Dalziel Sub-Precinct as part of the future development of the University land in this locality.

We note that Council consultations with NSW Health have indicated a preference for ancillary commercial activities to be permissible in the vicinity of the Hospital. The proposed R3 zone will be able to permit cafes and neighbourhood shops to provide services to meet the day to day needs of persons who live and work in the locality. However, 'higher order' commercial activities (such as supermarkets, specialty shops and the like) would continue to be provided in the commercially zoned land, including Lismore Square (which is located in close proximity to the Hospital). This approach is recommended in order to support the commercial land uses occurring within the existing zoned commercial areas.

***Recommendation 1** – Introduce the R3 Medium Density Residential Zone into the LLEP 2012 and apply this zone to key areas of the Lismore Health Precinct.*

***Recommendation 2** – Increase the maximum permitted building height for those areas to be zoned R3 within the Health Precinct. The proposed height limitations are illustrated on **Plan 7**.*

***Recommendation 3** – Retain the R1 General Residential Zone for those portions of the Health Precinct which are currently predominately residential in character and/or removed from the core area of the Hospital Precinct.*

C. B3 Commercial Core

The western end of the Precinct is currently zoned B3 Commercial Core (which is the same zone as Lismore Square and the Lismore City Centre). This zoning permits a range of commercial and health related facilities, however residential land uses are limited to 'shop top housing' and 'seniors housing'.

As detailed above, the Western Precinct is centrally located, flat and contains a number of large future development sites. However, the existing planning framework

does not fully reflect these opportunities. Currently, Lismore has over 80ha of land zoned B3 Commercial Core. As part of the preparation of the Growth Management Strategy, Hill PDA recommended that Council may seek to explore opportunities to change the zoning on the periphery of the B3 zoned area to broaden opportunities for potential investors in these areas. It was further recommended that a B4 Mixed Use zoning may be appropriate and would provide opportunities to increase the number of residents living within the CBD area (and in close proximity thereto) as the zone enables a greater range of residential types. Hill PDA's recommendation is consistent with Council's planning intent for the Health Precinct.

Given the above, this report proposes applying the B4 Mixed Use Zone to that portion of the Western Precinct currently zoned B3 Commercial Core, with this zoning supplemented by an increase in building height controls.

***Recommendation 4** – Rezone those portions of the site currently zoned B3 Commercial Core to B4 Mixed Use Zone.*

D. R2 Low Density Residential Zone

The Western Precinct also contains an area zoned R2 Low Density Residential Zone. It is understood that this zone was applied to the land in recognition of the flood characteristics of this area. However, the recent completion of the Lismore Floodplain Risk Management Plan 2014 has confirmed that this area represents a combination of medium to high flood risks. Whilst the Management Plan limits 'standard' residential development in the high risk area to shop top housing, a greater range of opportunities are available in the medium risk area.

This part of the Lismore Health Precinct is strategically located between the Hospital and the commercial zoned land fronting Uralba Street. Accordingly, it is considered appropriate that Council consider changing the zoning controls for this portion of the Precinct to encourage future redevelopment to support the development of the Health Precinct. Whilst there is an argument that it is desirable to retain a range of housing types (including low density housing) within accessible areas, were development opportunities increased for the existing B3 zone to the west and the proposed R3 Zone to the east, retention of an isolated 'pocket' of low density appears incongruous. Furthermore, development in this small pocket pursuant to the R2 zone provisions would not 'fit' with the identified preferred longer term built form within the Health Precinct.

With respect to the land currently Zoned R2, this report presents two options as follows:

- **Option A** – Rezone the land from R2 Low Density to R3 Medium Density Zone (refer **Plan 6A**) and increase the building height controls in this area (**Refer Plan 8**). This option would provide an 'up zoning' of the land currently zoned R2, in that a wider range of residential land uses and health service facilities would be permissible with development consent than is currently the case. The locality would, however, continue to be predominately residential in character, albeit with a more intensive built form than is currently the case.
- **Option B** – Rezone the land from R2 Low Density Zone to B4 Mixed Use Zone (refer **Plan 6B**) and increase the building height controls in this area (**Refer Plan 8**). Applying the B4 Zone would represent a significant 'up-zoning' of those areas currently zoned R2 Low Density Residential and a wide range of non-residential uses would be permitted. However, given the central location and proximity of the area to key transport corridors and attractions within the Health Precinct and beyond, the area is well suited to more intensive redevelopment.

An advantage of applying the B4 zone rather than the R3 is that it provides a greater level of flexibility particularly with respect to providing flood compatible activities on the ground level. The application of such zoning could however be expected to result in a significant change in the current predominately residential character.

***Recommendation 5** – Rezone those portions of the site currently zoned R2 Low Density Residential to either:*

- ***Option A** – R3 Medium Density Zone; or*
- ***Option B** - B4 Mixed Use Zone.*

***Recommendation 6** – Increase the maximum permitted building height for land located within the Western Precinct (ie those areas currently zoned B3 Commercial Core and R2 Low Density). The proposed height limitations are illustrated on **Plan 8**.*

E. RE1 Public Recreation.

There are several public parks located within the Health Precinct which are currently Zoned RE1 Public Recreation. No changes are proposed to the town planning framework for these parks.

3.2.3 LEP Building Height

Building Height is primarily controlled by the provisions of the Lismore Local Environmental Plan 2012. **Plan 7** illustrates the existing building height controls as specified in the LEP. The maximum permitted building height (as measured from ground level to the highest point of the building) varies from:

- 8.5m in the elevated residential areas surrounding the hospital;
- 9.0m in the lower lying residential areas subject to flooding; and
- 11.5m in the commercial zoned area generally fronting Brewster Street.

Plan 8 illustrates the proposed building height limits to be applied within the Precinct. These height limitations will be introduced via both the LEP and the DCP. In this regard, the DCP will contain detailed design controls relating to permissible building envelopes. It is envisaged that this will involve lower buildings to the street and higher buildings to the rear.

***Recommendation 7** – Increase the permissible building heights for those parts of the Health Precinct to be zoned R3 Medium Density and B4 Mixed Use Zone.*

3.2.4 DCP Design Controls

Council is currently reviewing the design controls for residential development contained within Chapter 1 of the DCP. It is expected that the majority of these (revised) controls will be able to be applied within the Health Precinct.

However, with the introduction of significantly increased building heights within the Precinct, it is important that the DCP provides clear design requirements with respect

to setbacks, overlooking and overshadowing for taller developments.

***Recommendation 8** – Include within the DCP, detailed design controls for those parts of the Precinct where increased building heights are proposed.*

3.2.5 DCP Flood Planning Requirements

The portion of the Precinct proposed for the B4 Mixed Use Zoning is mapped as being flood prone. Council's DCP identifies a range of flood planning requirements for this area. These provisions will continue to apply to the area.

Related to this, LEP drafting instructions issued by the Minister for Planning (known as S117 Directions) require that LEP amendments '*must not contain provisions that apply to the flood planning area which permit a significant increase in the development of that land.*' The Direction goes on to advise that LEP amendments may be inconsistent with the direction only if the relevant planning authority can satisfy the Director General that:

- the proposal is in accordance with a Floodplain Risk Management Plan prepared in accordance with the principles and guidelines of the Floodplain Development Manual 2005, or
- the provisions of the proposal that are inconsistent are of minor significance.

The proposed LEP amendments are not inconsistent with the provisions of the Lismore Floodplain Risk Management Plan 2014 and accordingly it can be demonstrated that the project accords with the applicable 117 Direction.

Given the above, we note that the DCP provisions will need to accord with the applicable flood planning requirements, namely:

- within the high risk flood area (the portion of the Precinct closer to Brewster Street) permanent residential development will only be able to be in the form of 'shop top housing' and will not be able to occur at ground level (commercial activities and car parking can however occur at ground level); and

- within the medium risk flood area (in the vicinity of Diadem Street) a greater range of residential types will be able to occur (such as town houses and residential flat buildings), however there will still be limitations with respect to the permitted land uses on the ground floor.

3.2.6 DCP Car Parking Requirements

On-street parking associated with hospital and other health services is causing substantial congestion in the surrounding street network. Residents in the locality are keen to ensure that future development does not exacerbate the situation.

Whilst a possible future multi-level car park is expected to assist in alleviating these impacts, any future development needs to provide adequate on-site parking. As such, broad reductions in the existing on-site parking rates for health services facilities or residential developments in the Precinct is unlikely to receive community support. However, Council may wish to consider the following:

- application of differing parking rates for 'general practitioners' vs 'specialist' medical practices; and
- Enabling staff associated with a medical practice to park in a 'stacked' arrangement, provided that an appropriate Management Plan is established to ensure that staff can readily access their vehicles when required.

***Recommendation 9:** That a review be completed with respect to the DCP on-site car parking requirements within the Precinct as they apply to medical premises.*

3.2.7 DCP for the Lismore Health Precinct

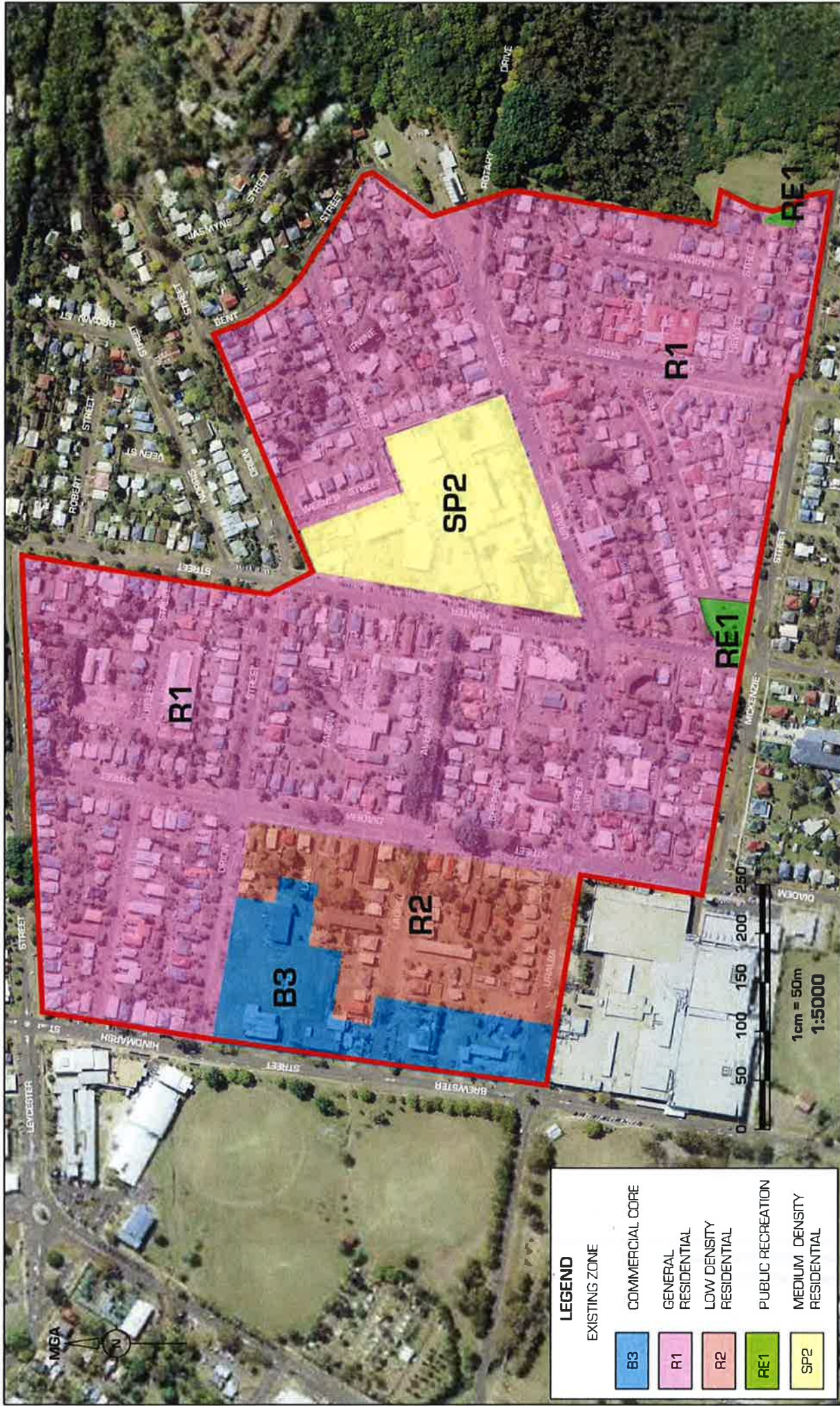
Given the recognised importance of the Lismore Health Precinct it is considered that the DCP provisions outlined above will be incorporated into a new Chapter within Part B of the DCP relating specifically to the Lismore Health Precinct. This Chapter will establish Council's planning objectives and key design controls for development within the Health Precinct. In particular, the Chapter will include:

- Planning Objectives;
- Master Plan identifying key development sites, connectivity and the like;
- Community information with respect to the types of development that is permitted in the different parts of the Precinct;

- Urban design requirements for development within the Precinct; and
- Cross references to other relevant components of the DCP.

Recommendation 10: *That a new Chapter be introduced into Part B of the DCP specifically relating to the Lismore Health Precinct.*

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LEGEND	
EXISTING ZONE	
B3	COMMERCIAL CORE
R1	GENERAL RESIDENTIAL
R2	LOW DENSITY RESIDENTIAL
RE1	PUBLIC RECREATION
SP2	MEDIUM DENSITY RESIDENTIAL

REV DATE AMENDMENT

A
B
C
D
E

PLAN 5 - EXISTING ZONING

CLIENT: LISMORE CITY COUNCIL
 LOCATION: LISMORE HEALTH PRECINCT
 REVIEW OF TOWN PLANNING CONTROLS
 DATE: 23 July 2014
 SCALE: 1:5000 @ A4
 REF: 12/397
 DRAWN: bk

Newton Denny Chapelle
 Surveyors Planners Engineers
 Email: office@newtondennychapelle.com.au
 LISMORE 31 Carrington St. Lismore 2480 PH 6622 1011
 CASINO 100 Barker St. Casino 2470 PH 6662 5000

SOURCE PLAN: www.maps.six.nsw.gov.au - accessed 08 July 2014

12/397 - lismore city council - plan 5 - existing zone



REV DATE AMENDMENT

B	22/01/15	HEIGHT/BDY
C	28/03/15	TEXT
D		
E		

SOURCE PLAN: www.maps.six.nsw.gov.au - accessed 08 July 2014
 L:\Jobs\2012\12397-122-planning\adjoining plans\old plans\12397 - proposed height controls

PLAN 8 - PROPOSED HEIGHT CONTROLS

CLIENT: LISMORE CITY COUNCIL
 LOCATION: LISMORE HEALTH PRECINCT
 REVIEW OF TOWN PLANNING CONTROLS
 DATE: 23 July 2014
 SCALE: 1:5000 @ A4
 REF: 12/397
 DRAWN: DK

Newton Denny Chapelle

Surveyors Planners Engineers
 Email: office@newtondennychapelle.com.au
 LISMORE 31 Carrington St. Lismore 2480 PH 6622 1011
 CASINO 100 Barker St. Casino 2470 PH 6662 5000

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Indicative Future Built Form

Section 4

4.1 Introduction

The combination of changes to the LEP and DCP as outlined in Section 3 of this report may have the potential to result in a significant change to the building form within key parts of the Precinct. In order to provide Council and the community with a better understanding of the possible built form a series of plans have been prepared relating to the following locations within the Precinct:

- **Section 1** – Uralba Street through to Dalziell Street (opposite Hospital entry);
- **Section 2** – Uralba Street through to Lismore Square;
- **Section 3** – Brewster Street to the north of Gaggin Lane (Opposite Oval);
- **Section 4** – Orion Street (Between Brewster Street and Diadem Street);
- **Section 5** – Laurel Avenue (Between Diadem Street and Hunter Street); and
- **Section 6** – Diadem Street to the south of Gaggin Lane.

The plans incorporate a range of information which is intended to form the basis of the future DCP provisions, including:

- Street cross sections;
- Photographic plates of buildings of similar scale to that which is proposed to be permitted under the new planning controls; and
- General design principles for future development.

Whilst feedback is sought with respect to all aspects of this Discussion Paper, particular feedback is sought with respect to the possible future application of a building height plane to side (and possibly rear) property boundaries. This involves buildings to be set back progressively as the building increases in height – that is, the higher the building, the greater the setback. As such, two plans have been prepared illustrating indicative street elevations. These plans provide options with respect to possible future building envelopes as follows:

- **Indicative Street Elevation Option 1**

Explanation – This option does not apply a building height plane. Rather, it requires the upper level to have a floor area of 50% of the level below. Interface with adjoining properties would be managed via setting minimum building setback provisions and performance based requirements relating to managing issues such as overlooking and overshadowing.

Pros – This approach is broadly consistent with the approach contained within Council's Working Draft Residential DCP. Furthermore, it better recognises the longer term urban character that the Precinct will achieve as redevelopment occurs over time.

Cons – The built form of the new structure has the potential to be more imposing when viewed from neighbouring properties – particularly in those parts of the precinct where 'standard' dwellings are located (as opposed to 'elevated' dwellings in the floodplain).

- **Indicative Street Elevation Option 2**

Explanation – This option applies a building height plane of 45° as measured from 1.8m above the side property boundary. Council does not currently apply a building height plane to residential development in Lismore, however some nearby coastal Councils (such as Byron and Ballina) apply such a requirement.

Pros – A building height plane provides landholders with a clear and prescriptive indication of the permitted building envelope on adjoining parcels. It also reduces overshadowing of adjoining parcels and provides a 'gentler' transition between the existing dwellings and the proposed redevelopment of the Precinct.

Cons – As building height increases the capacity to achieve a meaningful building footprint reduces substantially. This reduces the number of units which are possible on each level, which in turn reduces the developer's return on construction costs for each

level of the building. Construction costs are also increased as the building needs to provide structural support in increments (that is, rather than a single wall extending 2 or 3 storeys, the ground floor wall is structurally removed from the first floor wall etc). Whilst this arrangement may be viable in areas where an upper level with a dramatic view (such as in Byron Bay) will attract a generous sale price, in Lismore the property market does not present such incentives. In addition, for smaller development sites, the application of the height plane often results in what is referred to as a 'wedding cake' building which does not necessarily provide for an attractive streetscape.

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Contribution Discount Policy

Section

5

5.1 Introduction

Whilst town planning zoning and design controls provide an important method to facilitate future redevelopment in the Health Precinct, other mechanisms are also available to Council. Of these, the option of expanding the Contributions Discount Policy warrants careful consideration.

5.2 What are Developer Contributions?

For most new development, Council requires the developer to pay what are known as 'developer contributions'. These contributions are charged either via:

- Section 94 of the EP&A Act 1979 (for community facilities, opens space, roads and other such infrastructure); or
- Section 64 of the Local Government Act 1993 (for water and sewer infrastructure). In the Health Precinct, contributions are payable to both Lismore Council and Rous Water.

The contributions are usually pooled and utilised on major infrastructure items required as the result of additional population growth. The funds can only be spent on items identified within the applicable Contributions Plan.

As a guide, in 2014–2015, the total contribution cost for a new 2 bedroom unit located within the Health Precinct is approximately \$20,940, of this \$6,818 is payable to Rous Water with

the remaining \$14,122 payable to Council. The contribution costs are typically added to the purchase price of the dwelling (thereby reducing affordability) or absorbed by the developer (reducing profitability and viability).

5.3 Contributions Discount Policy

In August 2014, Lismore City Council introduced the Contributions Discount Policy which means that Section 64 and Section 94 fees are waived in certain circumstances. Under the existing discount Policy the following developments within the Health Precinct would receive a discount on the contribution payments:

- Secondary dwellings are exempt from paying contributions (subject to meeting certain design criteria);
- 1 or 2 bedroom dual occupancies (<115m²) are exempt from paying contributions (subject to meeting certain design criteria);
- 2 or more bedroom dual occupancies (>115m²) pay 30% of an ET (subject to meeting certain design criteria).

In addition, for a defined area within the Lismore CBD, all new infill dwellings received an exemption from paying the contributions (subject to meeting certain design criteria)

5.4 Options

There are a number of options available with respect to incorporating the Heath Precinct within the Discount Policy. For the purpose of this Discussion Paper, attention has focussed on those options which have the greatest potential to achieve the aim of increased residential supply within the Precinct. As such, the following Options all relate to those portions of the Precinct where changes are proposed to the zoning and building height controls to facilitate development – more specifically those areas proposed to be zoned B4 Mixed Use Zone or R3 Medium Density Zone (as illustrated on Plan 6).

Option A

- Retain the existing Discount Policy for secondary dwellings.
- Expand the Discount Policy as it relates to residential development in the Lismore CBD so that it applies also to the areas within the Health Precinct which are to be zoned B4 or R3.

Pros – Extending this aspect of the Discount Policy so that it also applies within the Health Precinct would act as an incentive to prospective developers to take advantage of the increased development opportunities available as the result of changes to the planning controls. This in turn will help meet Council achieve its stated objectives of providing increased housing opportunities within the Health Precinct.

Cons – Constructing major public infrastructure is an expensive exercise and Councils have limited options with respect to raising revenue. Accordingly, Council would need to monitor the uptake of the Discount Policy to ensure that future infrastructure demands are able to be met.

Option B

- Retain the existing Discount Policy for secondary dwellings.
- Expand the Discount Policy as it relates to residential development in the Lismore CBD so that it applies also to the areas within the Health Precinct which are to be zoned B4 or R3 but apply limitations with respect to which types of development it applies to.

Explanation – This approach will enable Council to target the Policy to larger scale developments (such as town house and unit developments containing a certain number of storeys or a minimum number of units).

Pros – This would assist in encouraging more 'substantial' developments which have the greater capacity to address the identified demands and planning objectives within the Precinct. In addition, it would potentially discourage smaller developments which, once built, will reduce the likelihood of these parcels forming part of larger redevelopment projects in the medium to long term. This is because the parent parcel will usually have been Strata subdivided and the cost of the land with improvements will have increased substantially.

Cons – Small scale redevelopments will also contribute to increased housing stock in the Precinct. Excluding such projects from the Discount Policy may have the effect of reducing the quantum of additional housing stock achieved within the area than would otherwise occur.

Option C

- Retain the existing Discount Policy for secondary dwellings.
- Expand the Discount Policy as it relates to residential development in the Lismore CBD so that it applies also to the areas within the Health Precinct which are to be zoned B4 or R3 but specify a time limit for the application of the discount policy (say, to development consents issued within 3 years of the introduction of the Policy).

Pros – This would provide an incentive for developers to advance projects in the term. It would also provide Council with a finite timeframe for take-up of the Policy which may assist with defining future infrastructure funding arrangements.

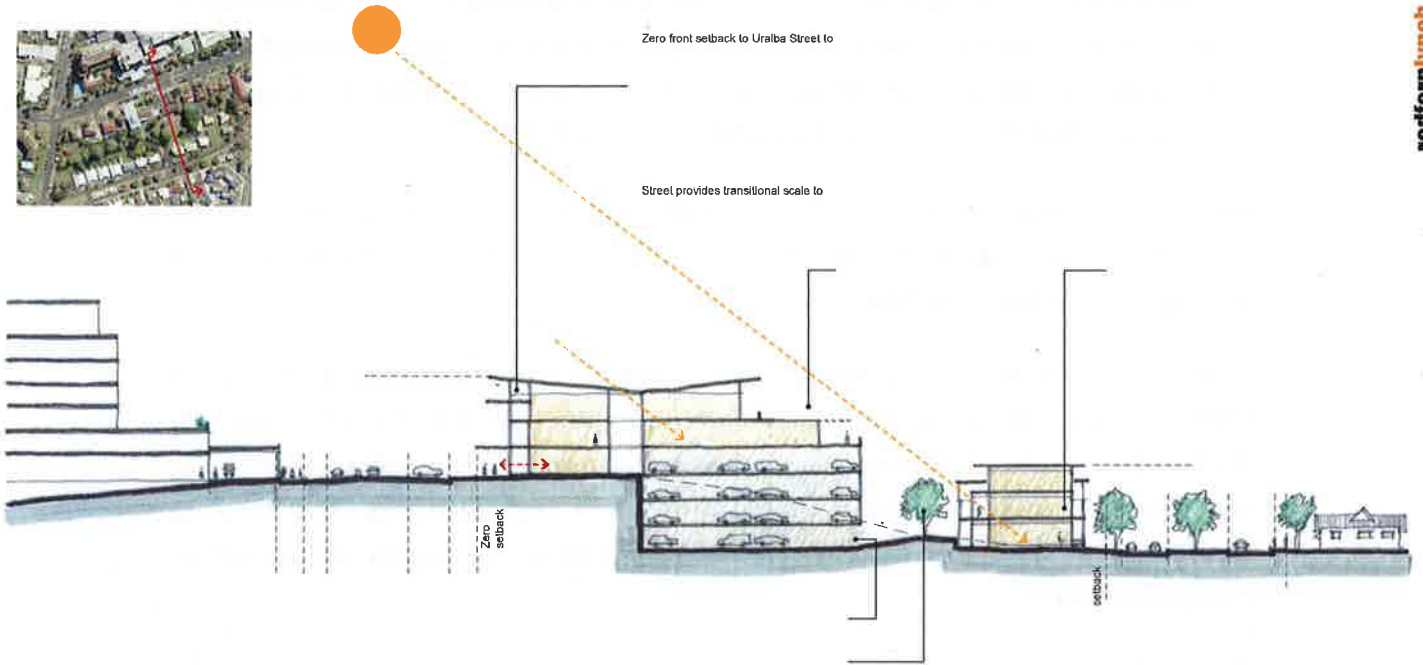
Cons – Comprehensive redevelopment of the Precinct as foreshadowed within this Discussion Paper is a long term proposition. Limiting the application of the Policy in this way may discourage developers from making longer term commitments to the purchase of land within the Precinct. In addition, Council is required to review the existing Discount Policy every two years. As such, there is an opportunity to review the take-up and ongoing operation of the Policy periodically.

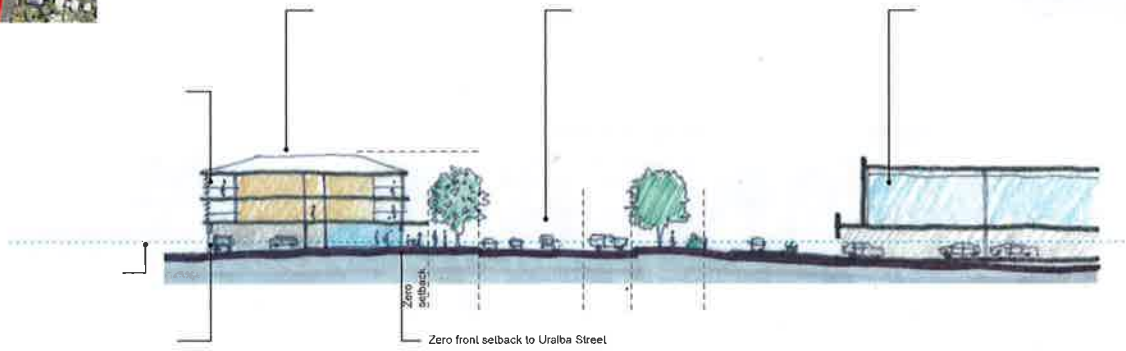
Option D

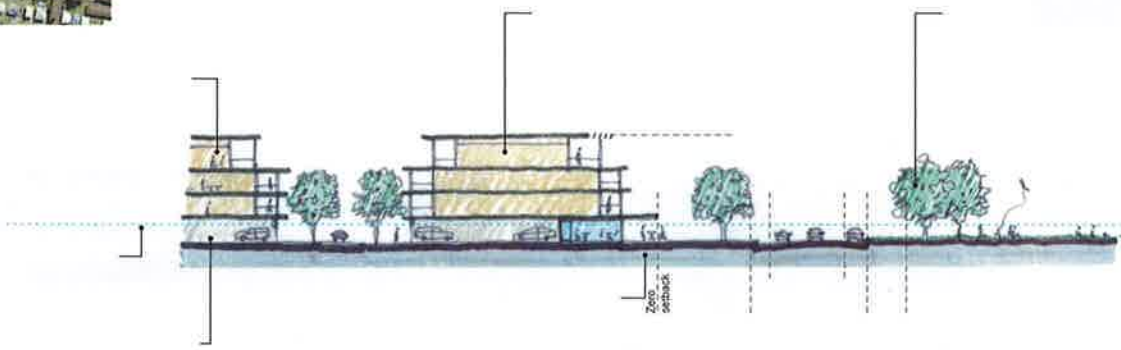
- Remove the existing Discount Policy for secondary dwellings within the Health Precinct.
- Expand the Discount Policy as it relates to residential development in the Lismore CBD so that it applies also to the areas within the Health Precinct which are to be zoned B4 or R3 but apply limitations with respect to which types of development it applies to.

Explanation – There is a concern that small scale granny flats built within the Precinct may have the effect of reducing the likelihood of parcels being available for future redevelopment. However, this option is not recommended as it would appear contrary to the objectives of the Affordable Rental Housing SEPP. Furthermore, secondary dwellings are by definition small structures ancillary to a main dwelling.

Recommendation 12 – *That Council make changes to the Contributions Discount Policy to encourage residential development within the Health Precinct. The preferred approach is to be confirmed following exhibition of Discussion Paper.*

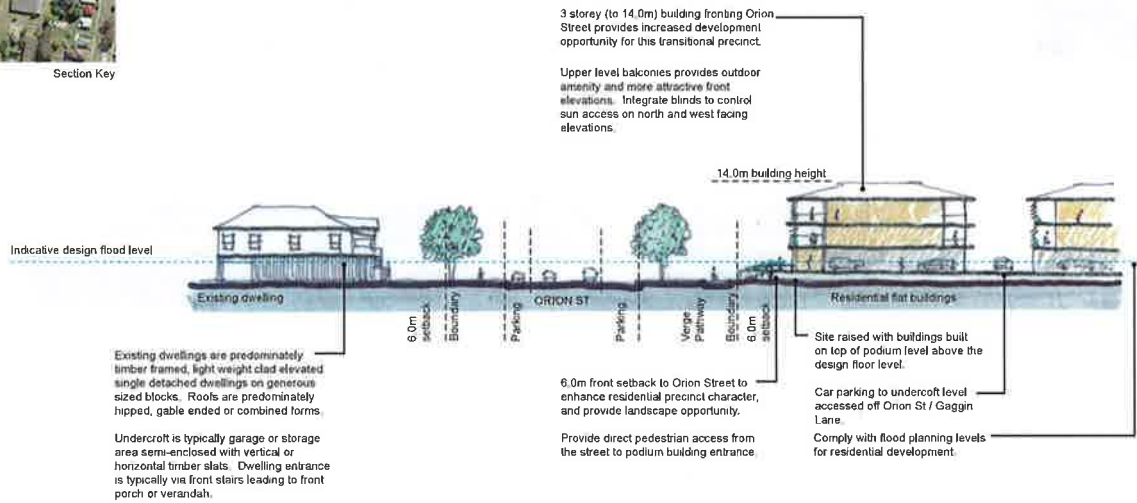


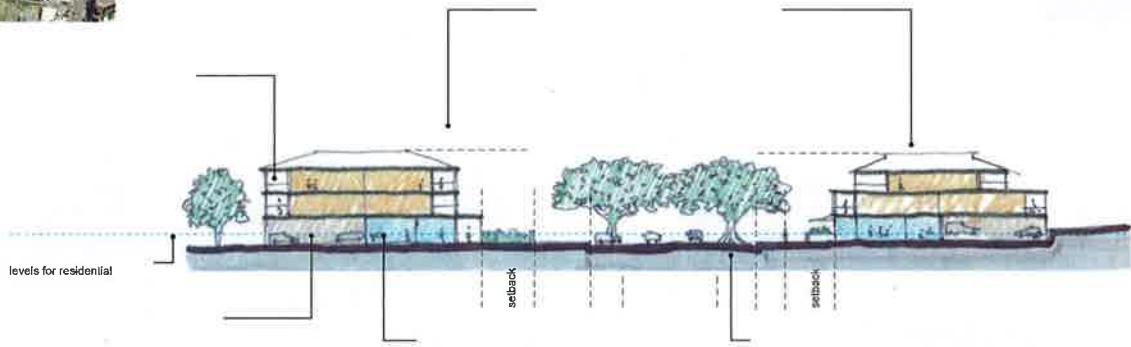






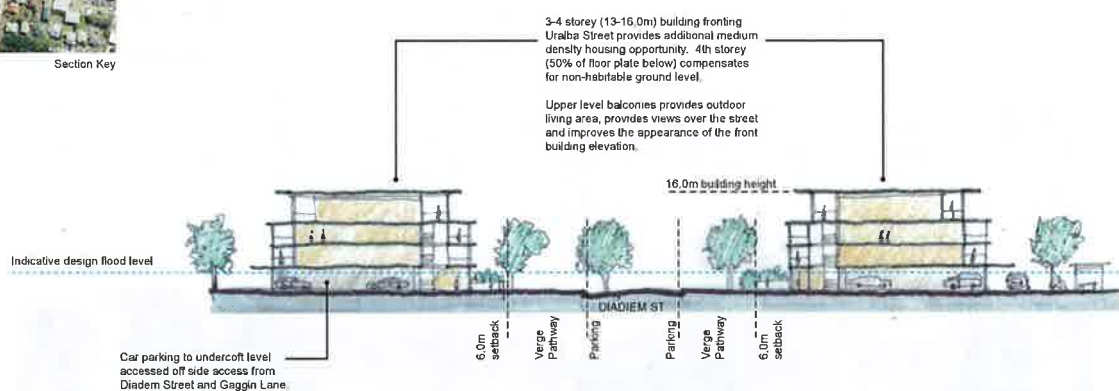
Section Key







Section Key



Medium density housing design

Design medium density housing to look more like a large house than a traditional block of flats.

Design includes upper level balconies which provides outdoor living area, views over the street and improves the appearance of the front building elevation.

Set in the upper level (level 3 or 4) from the level below to reduce the visual impact of additional height as experienced from the street. This will also reduce impacts of overshadowing.

Design roofs to be consistent with the existing building design including pitched, hipped and gabled ended.



Characteristics of existing dwellings include:

Predominately elevated dwellings with garage and storage to undercroft areas.

Easily identifiable front entrance, generally off an elevated porch or verandah.

Timber framed construction with lightweight cladding materials (weather board, FC sheeting, metal sheet roofing).

Generous front and side setbacks to allow landscaping including trees.

Elevate ground floor units on podium above design flood level.

Ground floor units address to street with outdoor living areas and direct pedestrian access.

Separate pedestrian and vehicle (at least 5.5m wide) points of entry. Integrate car parking to the buildings undercroft space.

Provide generous landscape areas to allow mature vegetation to grow to screen and provide shade.

Use materials suitable to subtropical climate including a mix of masonry (for structure and thermal mass) and lightweight cladding materials such as weather board.

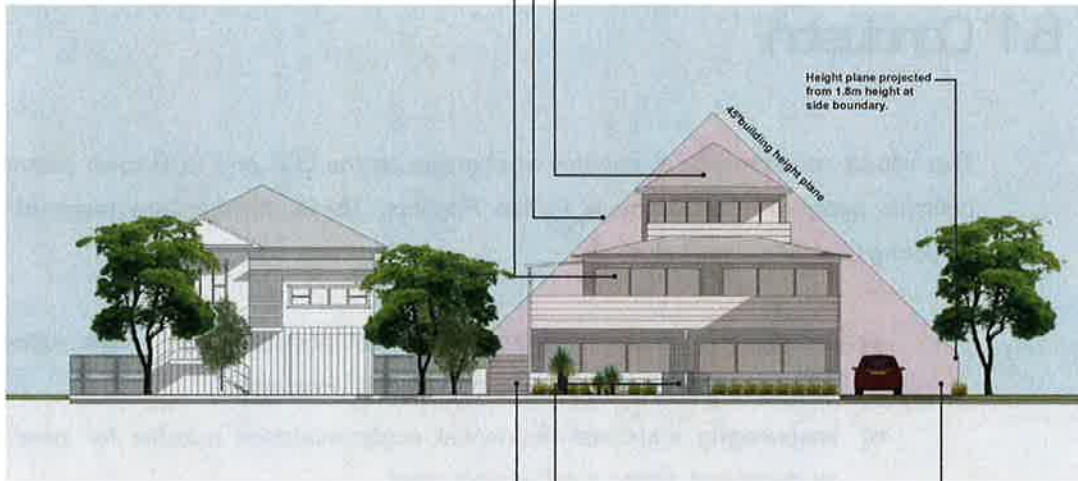
Medium density housing design - 45° height plane projection

Design medium density housing to look more like a large house than a traditional block of flats.

Projections: upper level balconies which provides outdoor living area, views over the street and improves the appearance of the front building elevation.

Set in the upper level (level 3 or 4) from the level below to reduce the visual impact of additional height as experienced from the street. This will also reduce impacts of overshadowing.

Design roofs to be consistent with the existing building design including pitched, hipped and gabled ended.



Characteristics of existing dwellings include:

Predominately elevated dwellings with garage and storage to undercroft areas.

Easily identifiable front entrance, generally off an elevated porch or verandah.

Timber framed construction with lightweight cladding materials (weather board, FC sheeting, metal sheet roofing).

Generous front and side setbacks to allow landscaping including trees.

Ground floor units address to street with outdoor living areas and direct pedestrian access.

Separate pedestrian and vehicle (at least 5.5m wide) points of entry. Integrate car parking to the buildings undercroft space.

Provide generous landscape areas to allow mature vegetation to grow to screen and provide shade.

Use materials suitable to subtropical climate including a mix of masonry (for structure and thermal mass) and lightweight cladding materials such as weather board.

Conclusion

6.1 Conclusion

This report recommends a number of changes to the LEP and DCP town planning controls applying in the Lismore Health Precinct. These changes are targeted at achieving Council's stated aims of:

- a) encouraging additional specialist medical practices and health support services to be established within the Health Precinct;
- b) encouraging additional residential accommodation suitable for medical students and visiting medical personnel;
- c) encouraging higher housing densities to enable more people to reside in a location which is central and accessible to the Health Precinct, Lismore City Centre and Lismore Square; and
- d) protecting the amenity of existing and future residents within the Health Precinct, whilst also achieving the above.

6.2 Summary of Recommended Changes to the LEP

Given Council's stated objectives for the Lismore Health Precinct, a number of changes are recommended to the current Local Environmental Plan to achieve these aims. Following provides a summary of these recommendations:

Recommendation 1 – Introduce the R3 Medium Density Residential Zone into the LLEP 2012 and apply this zone to key areas of the Lismore Health Precinct.

Recommendation 2 – Increase the maximum permitted building height for those areas to be zoned R3 within the Health Precinct. The proposed height limitations are illustrated on **Plan 8**.

Recommendation 3 – Retain the R1 General Residential Zone for those portions of the Health Precinct which are currently predominately residential in character and/or removed from the core area of the Hospital Precinct.

Recommendation 4 – Rezone those portions of the site currently zoned B3 Commercial Core to B4 Mixed Use Zone.

Recommendation 5 – Rezone those portions of the site currently zoned R2 Low Density Residential to either:

- **Option A** – R3 Medium Density Zone; or
- **Option B** – B4 Mixed Use Zone.

Recommendation 6 – Increase the maximum permitted building height for land located within the Western Precinct (ie those areas currently zoned B3 Commercial Core and R2 Low Density). The proposed height limitations are illustrated on **Plan 8**.

Recommendation 7 – Increase the maximum permitted building height for those areas to be zoned B4 within the Health Precinct. The proposed height limitations are illustrated on **Plan 8**.

Recommendation 8 – Increase the permissible building heights for those parts of the Health Precinct to be zoned R3 Medium Density and B4 Mixed Use Zone. The proposed height limitations are illustrated on **Plan 8**.

Table 1 provides a summary comparison between the existing and proposed building heights within the Health Precinct.

Table 1 –Zoning and Building Height Comparisons

Existing Zone	Proposed Zone	Existing Height Control	Proposed Height Control
B3 Commercial Core	B4 Mixed Use	11.5m	16m
R2 Low Density Residential	R3 Medium Density or B4 Mixed Use Zone	9m	16m
R1 General Residential	R1 General Residential	9m and 8.5m	9m and 8.5m (ie, no change)
R1 General Residential	R3 Medium Density	9m and 8.5m	13m (Central Sub Precinct) 13m* (Dalziel Precinct) (*Note: Topographic change may allow building with up to 5 storeys, subject to earth works)

6.3 Summary of Recommended Changes to the DCP

In order to meet Council's planning objectives for the Precinct, a number of changes are recommended to the current Development Control Plan. Whilst the details of these changes are still to be developed, the following provides a summary of the recommendations made with respect to the DCP planning framework:

***Recommendation 9** – Include within the DCP, detailed design controls for those parts of the Precinct where increased building heights are proposed.*

***Recommendation 10:** That a review be completed with respect to the DCP on-site car parking requirements within the Precinct as they apply to medical premises.*

***Recommendation 11:** That a new Chapter be introduced into Part B of the DCP specifically relating to the Lismore Health Precinct.*

6.4 Summary of Changes to Developer Contributions

In order to facilitate development within the Health Precinct in accordance with the increased opportunities available under the proposed changes to the LEP and DCP, the following changes are recommended to Council's Developer Contributions Discount Policy:

***Recommendation 12** – That Council make changes to the Contributions Discount Policy to encourage residential development within the Health Precinct. The preferred approach is to be confirmed following exhibition of Discussion Paper.*

ATTACHMENT 2

Summary of Submissions to Discussion Paper

Lismore Health Precinct
Discussion Paper Exhibition Outcomes
Prepared by Newton Denny Chapelle – April 2014

A. Methodology

- 5 week exhibition period.
- Letters to all land holders.
- Local Matters.
- Drop-in session held Saturday 14 March at University Centre for Rural Health (10.30am – 1.30 pm).
- Health Infrastructure 'Coffee Cart' Meeting held Friday 20 March 2015.

Lismore Health Precinct
Discussion Paper Exhibition Outcomes
Prepared by Newton Denny Chapelle – April 2014

B. Written Submissions

#	Name	Property	Comment	Response	Recommended Action
1	Ray Barrett	102 Laurel Avenue	Submission - Existing Motor Vehicle Repair Station. - Vehicle Repair Stations prohibited in B4 Zone. - Requests review of zoning to makes land use permissible with Consent.	- Land use prohibited in both B3 and B4 Zones. - Not type of use intended to be encouraged in Health Precinct. - Business can continue using existing use rights / continuing use rights (subject to approval history).	No change
2	Michael Murphy	6 & 6a Fermoy Avenue	Submission - Subject land is in close proximity to the hospital and adjoins land proposed to be zoned R3. However, site is proposed for retention of R1 zoning in Discussion Paper. 'Site will experience significant impacts following hospital upgrade - Requests land be rezoned to R3.	- Request considered reasonable and has merit. - Zone extension shouldn't necessarily just apply to this submission.	Change boundary of R3 zone to include subject land and properties fronting Little Uralba Street.
3	Richard Allman	4 Weaver Street	Submission - Supports both changes in zoning and developer contributions off set policy. - Has wanted to redevelop his property but has been put off by large Council drain.	- Support noted. - Drainage line traversing locality is classified as a Class 1 stream. May be plausible to relocate underground, however this will be at the expense of future developers.	See response to comment # 1.

Lismore Health Precinct

Discussion Paper Exhibition Outcomes

Prepared by Newton Denny Chapelle – April 2014

4	Liz Heagney	Unknown	Submission - Supports both changes in zoning and developer contributions off set policy. - Suggests small scale 'temporary' development of larger sites pending full scale redevelopment. - Council needs to develop strategy for upgrades to kerbs / stormwater / drainage	Response - Support noted. - Zoning change will not prevent small scale 'temporary redevelopments'. Council will need to consider whether contributions offsets should apply to such projects. - DCP will include commentary regarding infrastructure upgrades required as the result of future development in the Precinct.	No change
5	Dean Casey	131 Laurel Avenue	Submission - Supports process & congratulates Council. - Advocates greater building heights on the flat areas of the R3 and B4 zone. - Argues that height and scale of the hospital upgrades are such that broader precinct is also able to increase building height (over and above that suggested in the Discussion Paper). - Greater building height may improve viability of development.	- Support noted. - The change in building heights proposed already represent a significant increase in development potential. - The precinct is quite large and the future physical relationship between a building on the flat vs the hospital on the hill is unclear. The two places will still 'read' quite separately. - However, seems contrary to the objectives of the Health Precinct planning process to limit height in the Central Sub Precinct to 3 storeys, particularly when considering that the flood characteristics of parts of the Sub Precinct will require the ground level to be used for non habitable purposes. - Future land holders (particularly those with key strategic landholdings) will be able to apply via the Planning Proposal process for further increases in height.	Change to the maximum building height controls for the Central Sub Precinct from 3 storeys to 4 storeys.
6	Robyn & Cliff Hyde	113 Laurel Avenue	Submission - Thanks Council for consultation process. - Supports both zoning options – however prefers Option B (ie R1 to B4)	- Support noted. - Support for B4 zone noted.	No change

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C. 'Drop-In' Session 14 March 2015 (21 Persons Attended)

#	Comment	Response	Recommendation
a	Pedestrian movement across Uralba Street at front of hospital requires particular attention. An underpass or overpass should be planned. Should not be relying on lights and chicanes.	Council relying on the standards adopted by the RMS to determine the appropriate treatment of this crossing. Council will continue to monitor pedestrian demands.	No Change
b	Dalziell Street should be one way on either side of central median strip.	Traffic Committee has considered this matter. Options are available to provide one way arrangement if required in future.	No Change
c	Heights should be increased even more than in Discussion Paper - Variable heights levels be allowed Hospital will be 11 Storeys.	<i>This comment made by same individual who wrote Submission No.5.</i> <i>Refer to responses to Submission No.5</i>	-
d	Will the changes in zoning and height controls affect our rates?	<i>Rates are determined by reference to the unimproved land value. It is reasonable to assume that land values will change if the zoning and building controls permit a significantly greater scale of development.</i> <i>Under Section 585 of the Local Government Act, you may apply for a 'postponement' of rates if you are responsible for paying rates for land on which there is a single dwelling house, that is used as such, and which is zoned for industry, commerce or residential flat buildings. Under this arrangement, you continue to pay rates as if the site was zoned for a dwelling house. The difference in rate value will be accumulated for 5 years. In the 6th year, the 1st year of postponed rates will be 'written off' along with accumulated interest. This process continues until the postponement ceases (typically on sale of the property). When the Postponement arrangement ceases, you will need to pay Council the current 'postponed' amount plus interest for the preceding 5 years.</i>	No Change

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e	Traffic volume on Diadem Street appears to warrant local traffic calming – particularly the residential area between Leicester Street and Orion Street.	Council engineers have investigated this matter and do not recommend closures or significant adjustments to road network in this area.	No Change
f	If existing Dayal Singh's building goes, Units should not be allowed on this site.	- This property is currently zoned R1 and no changes are proposed to this zoning in the Discussion Paper. - Units are permitted in the R1 Zone subject to compliance with the applicable DCP controls.	No Change
g	What about all the heritage houses in the area?	- There are a number of older style dwellings within the Precinct which are not identified as items of Local Environmental Heritage. Similarly the Precinct is not located within a heritage conservation zone. - Design controls within DCP will aim to provide reasonable interface between these existing structures and any redevelopment.	No Change
h	In favour of it as long as it doesn't turn us into a 'ghetto full of druggys'.	Noted.	No Change
i	Northern end of SP2 zone (just north of hospital) is a good spot for public car park station. Safe pedestrian access, unlimited height controls.	- Noted. - NSW Health Infrastructure have decided on an alternate location for the car park station.	No Change
j	- Weaver Street – Heights should be raised here. - Sewer main & Stormwater drain require attention	- Given direct inter-relationship of these properties to the Hospital, recommended that the R3 Zone in the Weaver Street area be permitted to have 3 storey buildings. - Refer to response to Submission 4.	Increase permissible building heights for the R3 Zone in the vicinity of Weaver Street to 3 storeys.
k	Michael Murphy owner of 6 & 6A Fermoy Avenue. Request to include property in R3 Zone	- This comment made by same individual who wrote Submission No.2 - Refer to responses to Submission No.2	Refer response to Submission 2.

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D. 'Coffee Cart' Session 20th March 2015

i	There was a general view that better quality construction lead to better residents. This was relevant in that there was a desire to not reduce the level of amenity that currently exists for residents in the precinct. They were keen not to have their amenity lowered.	- DCP will need to address amenity impacts. - Planning controls cannot directly impact on type of resident	No Change
m	There was some debate about whether or not we should have an upper limit on the number of units that could be in any one building. Also there was comment on whether or not we should be seeking to limit the number of higher density buildings that we would have in any one street or block.	- If the objective is to increase density and housing choice, limiting the number of dwellings within each building will act as a disincentive to this occurring. Second idea not really practical. - Council is able to review policy in, say, 10 years to ascertain if future refinement / changes are required.	No Change
n	Letters advising of the Discussion Paper exhibition did not get delivered to Irving Place.	- Review of mailing list data base indicates that it included Irving Place. - Residents had also been notified via Local Matters.	No Change
o	Consideration should be given to heritage values in Uralba Street, between Hunter and Diadem.	- These buildings are not heritage listed or in a heritage conservation area. - DCP will be an important planning tool to managed building form and amenity impacts	No Change
p	There seemed to be an objection to the 5 storey height limit, however the reasons were not clear.	Noted.	No Change
q	General concern regarding smaller affordable units – with people recalling some of the anti social behaviour associated with the former Mackenzie Street public housing units.	- DCP will need to address amenity impacts. - Planning controls cannot directly impact on type of resident	No Change
r	Concern from 1 person that the SP2 zone has no building height limit.	LLEP2012 doesn't apply building height limits to any of the SP2 zoned land.	No Change
s	Concern that the University units on Uralba Street are not the model for future units - with particular concern about their impact on residents in the Fermoy/Weaver Street area.	- Noted. - DCP will be an important planning tool to managed building form.	No Change



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ATTACHMENT 3

**Assessment Against S117
Ministerial Directions**

Assessment Against S117 Ministerial Directions

Section 117 Direction	Applies?	Comments
1. Employment and Resources		
1.1 Business and Industrial Zones	N/A	-
1.2 Rural Zones	N/A	-
1.3 Mining, Petroleum Production and Extractive industries	N/A	-
1.4 Oyster Aquaculture	N/A	-
1.5 Rural Lands	N/A	-
2. Environment and Heritage		
2.1 Environmental Protection Zones	N/A	-
2.2 Coastal Protection	N/A	-
2.3 Heritage Conservation	N/A	One Item of Local Environmental Heritage is located within the broader Health Precinct Investigation Area. This Item is not located within the area to which the current Planning Proposal relates.
2.4 Recreation Vehicle Areas	N/A	-
3. Housing, Infrastructure and Urban Development		
3.1 Residential Zones	Applies	The Planning Proposal is directly consistent with the requirements of this S117 Direction in the following ways: • The proposal will broaden the range of housing types permissible within the Health Precinct, by increasing the permitted building height and associated development opportunities; • The proposal will enable higher density development within a locality which is central and relatively well serviced by public transport and services. It is expected that this will assist in reducing demand for development on the urban fringe; • The proposal will be accompanied by a development control plan which will establish urban design criteria for the locality; • The proposal will increase the permissible residential density in the Precinct; and • The proposal relates to an established urban area which is fully serviced with urban infrastructure. •

3.2 Caravan Parks and Manufactured Home Estates	N/A	-
3.3 Home Occupations	Applies	The proposed R3 Medium Density Zone proposes to enable home occupations to occur without the need for development consent.
3.4 Integrated Land Use and Transport	Applies	The objective of this Direction is to ensure that urban structures, building forms, land use locations, development designs, subdivision and street layouts achieve the following planning objectives: (a) improving access to housing, jobs and services by walking, cycling and public transport, and (b) increasing the choice of available transport and reducing dependence on cars, and (c) reducing travel demand including the number of trips generated by development and the distances travelled, especially by car, and (d) supporting the efficient and viable operation of public transport services, and (e) providing for the efficient movement of freight. Comment: The Lismore Health Precinct is centrally located in close proximity to Lismore Base Hospital, Lismore Square Shopping Centre & the Lismore CBD as well as several public and private schools. A number of 'hail and ride' bus services go directly through the Precinct.
3.5 Development Near Licensed Aerodromes	N/A	-
4. Hazard and Risk		
4.1 Acid Sulfate Soils	N/A	-
4.2 Mine Subsidence and Unstable Land	N/A	-
4.3 Flood Prone Land	Applies	The western portion of the Health Precinct is mapped as being flood prone. The s117 Direction requires that LEP amendments 'must not contain provisions that apply to the flood planning area which permit a significant increase in the development of that land'. The Direction goes on to advise that LEP amendments may be inconsistent with the direction only if the relevant planning authority can satisfy the Director General that: • the proposal is in accordance with a Floodplain Risk Management Plan prepared in accordance with the principles and guidelines of the Floodplain Development Manual 2005, or • the provisions of the proposal that are inconsistent are of minor significance. The Lismore Floodplain Risk Management Plan 2014 has identified that the flood characteristics of the western portion of the Health Precinct are such that there are both adequate

		warning times of impending flooding and easily accessible evacuation routes. As such, increasing densities within the Precinct is not inconsistent with the outcomes of the Risk Management Plan. It is noted, however, that development within the flood prone parts of the Precinct will need to accord with the applicable DCP flood planning requirements, namely: • within the high risk flood area (the portion of the Precinct closer to Brewster Street) permanent residential development will only be able to be in the form of 'shop top housing' and will not be able to occur at ground level (commercial activities and car parking can however occur at ground level); and • within the medium risk flood area (in the vicinity of Diadem Street) a greater range of residential types will be able to occur (such as town houses and residential flat buildings), however there will still be limitations with respect to the permitted land uses on the ground floor.
4.4 Planning for Bushfire Protection	N/A	-
5. Regional Planning		
5.1 Implementation of Regional Strategies	Applies	The Far North Coast Regional Strategy 2006 identifies Lismore as being a 'Major Regional Centre'. The Strategy advises that 'Lismore will continue as a regional hub for creative industry and cultural activities, education, health, employment and retail' and advises that majority of population growth (in the Lismore LGA) will occur 'in and around Lismore'. The proposed changes to the planning controls in the Health Precinct directly support these provisions.
5.2 Sydney Drinking Water Catchments	N/A	-
5.3 Farmland of State and Regional Significance on the NSW Far North Coast	N/A	-
5.4 Commercial and Retail Development along the Pacific Highway, North Coast	N/A	-
5.5 Development in the Vicinity of Ellalong, Paxton and Milfield [Cessnock LGA].	N/A	-
5.6 Sydney to Canberra Corridor	N/A	-
5.7 Central Coast	N/A	-
5.8 Second Sydney Airport: Badgerys Creek	N/A	-
6. Local Plan Making		

6.1 Approval and Referral Requirements	Applies	No referral or concurrence requirements proposed within the Planning Proposal.
6.2 Reserving Land for Public Purposes	N/A	-
6.3 Site Specific Provisions	N/A	-
7. Metropolitan Planning		
7.1 Implementation of the Metropolitan Plan for Sydney 2036	N/A	-



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ATTACHMENT 4

**Assessment Against State
Environmental Planning Policies**

Assessment Against State Environmental Planning Policies

State Environmental Planning Policy	Applies?	Comments
SEPP 1 Development Standards.	N/A	-
SEPP 14 Coastal Wetlands.	N/A	-
SEPP 15 Rural Land-Sharing Communities.	N/A	-
SEPP 19 Bushland in Urban Areas.	N/A	-
SEPP 21 Caravan Parks.	N/A	-
SEPP 26 Littoral Rainforests.	N/A	-
SEPP 29 Western Sydney Recreation Area.	N/A	-
SEPP 30 Intensive Agriculture	N/A	-
SEPP 32 Urban Consolidation [Redevelopment of Urban Land].	N/A	-
SEPP 33 Hazardous & Offensive Development.	N/A	-
SEPP 36 Manufactured Home Estates.	N/A	-
SEPP 39 Split Island Bird Habitat.	N/A	-
SEPP 44 Koala Habitat Protection.	N/A	-
SEPP 47 Moore Park Showground.	N/A	-
SEPP 50 Canal Estate Development.	N/A	-
SEPP 52 Farm Dams & Other Works in Land & Water Management Plan Areas.	N/A	-
SEPP 55 Remediation of Land.	Applies	The Health Precinct is fully developed for urban purposes. Assessments with respect to likely site contamination on individual sites will occur as part of future development application processes.
SEPP 59 Central Western Sydney Economic & Employment Area.	N/A	-
SEPP 62 Sustainable Aquaculture.	N/A	-
SEPP 64 Advertising & Signage.	N/A	-
SEPP 65 Design Quality of Residential Flat Buildings.	Applies	The proposed building height limitations are such that SEPP 65 may apply to some future development applications within the Health

State Environmental Planning Policy	Applies?	Comments
		Precinct. The land use table for the proposed R3 Zone includes a planning objective which references the design principles promoted by SEPP 65. The proposed Development Control Plan for the Precinct has been developed having regard to the provisions of SEPP 65 and seeks to reinforce the provisions contained therewith. It is understood that no SEPP 65 Design Review Panel has been established for the Lismore LGA. Nevertheless, the Minister may seek to convene a Review Panel or appoint another expert party to review the Draft DCP prior to adoption.
SEPP 70 Affordable Housing (Revised Schemes).	N/A	-
SEPP 71 Coastal Protection	N/A	-
SEPP (Affordable Rental Housing) 2009	N/A	SEPP (Affordable Rental Housing) 2009 will continue to apply within the Health Precinct.
SEPP (Building Sustainability Index: BASIX) 2004	N/A	-
SEPP (Exempt and Complying Development Codes) 2008	N/A	SEPP (Exempt and Complying Development Codes) 2008 will continue to apply within the Health Precinct.
SEPP (Housing for Seniors or People with a Disability) 2004	N/A	SEPP (Housing for Seniors or People with a Disability) 2004 will continue to apply within the Health Precinct.
SEPP (Infrastructure) 2007	N/A	-
SEPP (Kosciuszko National Park – Alpine Resorts) 2007	N/A	-
SEPP (Kurnell Peninsula) 1989	N/A	-
SEPP (Major Development) 2005	N/A	-
SEPP (Mining, Petroleum Production and Extractive Industries) 2007	N/A	-
SEPP (Miscellaneous Consent Provisions) 2007	N/A	
SEPP (Penrith Lakes Scheme) 1989	N/A	-
SEPP (Rural Lands) 2008	N/A	-
SEPP (SEPP 53 Transitional Provisions) 2011	N/A	-

State Environmental Planning Policy	Applies?	Comments
SEPP (State and Regional Development) 2011	N/A	-
SEPP (Sydney Drinking Water Catchment) 2011	N/A	-
SEPP (Sydney Regional Growth Centres) 2006	N/A	-
SEPP (Three Ports) 2013	N/A	-
SEPP (Urban Renewal) 2010	N/A	-
SEPP (Western Sydney Employment Area) 2009	N/A	-
SEPP (Western Sydney Parklands) 2009	N/A	-