Canterbury City Council

137 Beamish Street, Campsie NSW 2194

Ph: (02) 9789 9300

PO Box 77, Campsie NSW 2194

Fax: (02) 9789 1542



REZONING APPLICATION Stage 1 A. APPLICANT'S DETAILS – Who is making this application? Applicant's Name: Address: Applicant's Signature: Phone No.: Address of the land that will be affected by the rezoning: 124 - 142 Beamish Street, Campsie	5
A. APPLICANT'S DETAILS – Who is making this application? Applicant's Name: Address: Applicant's Signature: Phone No.: Address of the land that will be affected by the rezoning: 124 - 142 Beamish Street (Camps) & Camps) & Camps	5
A. APPLICANT'S DETAILS – Who is making this application? Applicant's Name: Address: Applicant's Signature: Phone No.: Address of the land that will be affected by the rezoning: 124 – 142 Beamish Street (Carnos)e	5
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Address: Applicant's Signature: Phone No.: Post Social Post Code: 1495 Date: 09/10/201 B. PROPERTY DETAILS Address of the land that will be affected by the rezoning: 124 - 142 Beamish Street (Camposite)	5
Address of the land that will be affected by the rezoning: 124 - 142 Beamish Streat Campsile	
124-142 Beamish Streat, Campsile	
16-18 Ninth Avenue Compsie (Please see attached betters of authority) Lot No.: Section: Deposited Plan / Strata Plan No.:	
C. YOUR PROPOSAL	
Please describe what land uses your application is intended to allow (e.g. construction of town houses, commercial development, etc.): No Change to Land use. Amoudwant to height controls and to enable a mixed use multi be referred, commercial a residential building. D. ZONING What is the current zoning of your property? B 2.	el
What type of zone do you want for your property? No change	
If the purpose of your application is to change the aims, definitions or clauses, which apply to the City in general or in part, or to add an additional permissible land use, please describe:	
change of height controls. to	
E. PROPERTY OWNER'S AGREEMENT – All owners, if there is more than one	
Owner's Name: Please see attached letters of an	thou, ty
Mailing Address: Post Code:	
Owner's Signature / Company Stamp: Date:	



CITY OF CANTERBURY 137 Beamish Street, Campsie NSW Telephone: (02) 9789 9300 Facsimile: (02) 9789 1542 www.canterbury.nsw.gov.au email: council@canterbury.nsw.gov.au

ABN: 55 150 306 339

*** OFFICIAL RECEIPT / TAX INVOICE ***

Cashier: TERM1 CL

Receipt Number: 1713705

Receipt Date: 14-0CT-2015 14:38:02

BEACAMP Pty Ltd 124 -142 Beamish St CAMPSIE NSW 2194

RC LEPREZ

15,000.00

ES LEP/Rezoning

Cheque

-15,000.00

Receipt Amount:

15,000.00

(* Indicates GST Applicable Items)

Amount Tendered:

15,000.00

Rounding:

Change:

J Group other Exp Consultant & Council PAID \$15,000 -(124-142 Bearwish Pal) FCP \$ 421