

APPLICATION FORM AND CONDITIONS



Certification of Shadow Diagrams

Lodgment via the NSW Planning Portal

www.planningportal.nsw.gov.au

Planning Portal queries: PH: 1300 305 695 OR Email:

info@service.nsw.gov.au

Council Use Only - Keep this box blank

PART 1 - CERTIFICATION

DECLARATION: I hereby certify that the shadow diagrams submitted with the proposal at:
(address)

for the erection of: (description of development)

are:

- i) in accordance with the survey (prepared by a registered surveyor) which is required to be submitted with the proposal;
- ii) drawn to true - north;
- iii) to indicate shadow cast by the proposal at 9.00 am, noon, 3.00 pm, mid-winter and equinoxes;
- iv) to indicate the shadow cast by existing buildings and structures on the site and in the surrounding area; and
- v) if applicable elevations of adjoining premises showing existing and proposed shadows.

PART 2 CERTIFIER DETAILS

CERTIFIER: Mr Mrs Ms Other

Full Family / Company Name:

Full Given Names (or ACN)

Phone: Alternate ()

Mobile: Email:

Qualification (ie. Architect, Planner, Computer Technician, Surveyor)

Signed:

Date:

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