

Apply for certificate

Select the certificate action you would like to apply for	Subdivision certificate
Select the type of certificate you wish to apply for	Certificate for the full development
Do you want to direct this application to a Principal Certifier or State Agency for assessment?	Principal Certifier
Which approval type is this certificate in relation to?	Development Application number (DA)
Enter State determined number of the approval which is related to this certificate application (please include the SSD/SSI prefix)	
Has the SSI / SSD case been determined?	
Please enter DA number of the approval which is related to this certificate application (please include the DA prefix)	
Please enter CDC number of the approval which is related to this certificate application (please include the CDC prefix)	
Was the DA applied for via the NSW Planning Portal?	No
Was the CDC applied for via the NSW Planning Portal?	
Please provide portal application number (PAN)	
Please provide portal application number (CDC)	
Has the DA been determined?	No
Has the CDC been determined?	
Date of determination of the DA Case	
Please enter the date the construction certificate or CDC was issued	
Date of determination of the state determined case	
Site address #	1
Street address	125 MULGOA ROAD PENRITH 2750
Local government area	PENRITH
Lot / Section Number / Plan	2/-/DP1263697 <input checked="" type="checkbox"/>
Primary address?	Yes
Planning controls affecting property	

Applicant details

Title	
First given name	IM
Other given name/s	
Family name	OK
Contact number	0421222999
Email	imok@yopmail.com
Address	TEST
Is the applicant a company?	Yes
Name	ANDREA CRISP
ABN	40790194344
ACN	
Trading Name	KRISPY KREAMY

Developer details

Name	
ABN	

ACN	
Trading Name	
Email	
Address	

Land owner details

Owner/s of the Development Site	A company, business, government entity or other similar body owns the development site
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Owner Builder?	
Title	
First given name	
Other given name/s	
Family name	
Contact number	
Email	
Address	

Company #	1
Company, business or body corporate name	tesT
ABN/ACN	

Are there any security or site conditions which may impact on the person undertaking the inspection? eg: locked gates, dogs, animals etc	No
Provide details	

Payer details

Payer Type	A company, business, government entity or other similar body
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Company Name	COMMONWEALTH BROADCASTING CORPORATION PTY LTD
ABN	44000019796
ACN	000019796
Trading Name	RADIO 1065
Billing Address	TEST
Email ID	test@TEST.COM

Title	
First given name	
Other given name/s	
Family name	
Contact number	
Email	
Billing address	

Proposed development details

Does the development require	Build earthworks
	Strata Title

Please indicate the type of subdivision proposed	
Is the subdivision is the subject of an order of the Land and Environment Court under section 40 of the Land and Environment Court Act 1979	No
Number of proposed lots	
Number of existing lots	
PPN number	

Principal certifying authority

Enter the name of the nominated Principal Certifier / Registered Certifier of your choice	UNITED CONSULTING PTY. LTD.
Company name	UNITED CONSULTING PTY. LTD.
Address	Parramatta Road Parramatta 2150 NSW

Declarations

I declare that all the information in the application and checklist is, to the best of my knowledge, true and correct	Yes
I understand that the application and the accompanying information will be provided to the appropriate consent authority for the purposes of the assessment and determination of this application, and may be provided to other State agencies.	Yes
I understand that if incomplete, the consent authority may request more information, which will result in delays to the application.	Yes
The information and materials provided may be used for notification and advertising purposes, and may be made available to the public for inspection.	Yes
I acknowledge that copies of this application and supporting documentation may be provided to interested persons in accordance with the Government Information (Public Access) 2009 (NSW) (GIPA Act).	Yes
I have read and agree to the collection and use of my personal information as outlined in the Privacy Notice.	Yes
I agree to the appropriately delegated assessment officers attending the site for the purpose of inspection.	Yes
I agree to pay any required NSW Planning Portal Service Fee/s specified under Part 9, Schedule 4 of the Environmental Planning and Assessment Regulation 2021 to the Department of Planning and Environment.	Yes