



Application for Subdivision Clearance
City of Kalgoorlie-Boulder Town Planning Scheme No.2 2023

The Applicant (person submitting clearance who will be the contact for the application)

Contact Person: _____

Subject Property Address: _____

Postal Address: _____

Contact number: _____

Email: _____

Signature: _____

Landowner

Name: _____

Postal Address: _____

Contact number: _____

Email: _____

Signature: _____

Application

WAPC Submission Approval Reference: _____

Date of WAPC Approval: _____

Deposited / Strata Plan Number: _____

No. Lots on Proposed DP/DP: _____

Fee Payable: _____

Declaration

I declare that all conditions have been satisfied and I understand that anything left incomplete will result in the application being unable to proceed. I also understand that additional site inspections due to incomplete conditions may incur supplementary fees to be paid prior to clearance being issued.

Signed: _____ Name and Position: _____

Date: _____

