



Form 5D Application to extend the approval of a Structure Plan



Please print clearly and tick the appropriate boxes.

- 1. WAPC structure plan number
- 2. Structure Plan approval date
- 3. Local Government reference number
- 4. Structure Plan name (if applicable)

1. Local Government details

Local Government	<input type="text"/>		
Contact person	<input type="text"/>	Position	<input type="text"/>
Postal address	<input type="text"/>	Phone	<input type="text"/>
Town/suburb	<input type="text"/>	Fax	<input type="text"/>
Post code	<input type="text"/>	Email	<input type="text"/>

2. Applicant details

* The applicant is the person with whom the WAPC will correspond, and if approved, the person to whom the approval will be sent.

Name/Organisation	<input type="text"/>		
Contact person	<input type="text"/>	Position	<input type="text"/>
Postal address	<input type="text"/>	Phone	<input type="text"/>
Town/suburb	<input type="text"/>	Fax	<input type="text"/>
Post code	<input type="text"/>	Email	<input type="text"/>

3. Extension of approval information

- 1. Proposed length of extension
- 2. Brief statement of reason(s) why an extension of time is being sought
- 3. Supporting information (please specify)
- 4. Any other information/comments