

NORTHERN TERRITORY OF AUSTRALIA

Application for Compliance Check

1. LAND INFORMATION

LOCATION OF DEVELOPMENT

Town/Hundred/Locality:
Parcel Number(s) and/or Unit number:
LTO Plan:
Number and Street Name:
Zone:

2. APPLICANT INFORMATION

APPLICANT

ILIS Customer no. (if known):
Company name (if applicable):
ABN or ACN (if applicable):
Title: Mr Mrs Miss Ms Dr Other:
Family name(s):
Given name(s):
Preferred name(s):
Postal address:

Telephone no. (business hours):
Facsimile no.:
E-mail address:

NOTE:

**ALL CORRESPONDENCE
WILL GO TO THE PERSON
AND ADDRESS INDICATED
HERE.**

3. DESCRIPTION OF WORKS/USE

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4. DIMENSIONED PLANS

Attach dimensioned plans of the proposal

**ATTACHMENT A
TWO (2) COPIES**



5. APPLICANT TO SIGN AND/OR AFFIX SEAL

The application is complete and any required documentation is attached.

Signature(s)

___ / ___ / ___
Date

PRIVACY NOTE:

The Department of Planning and Infrastructure, collect the information on this form, or otherwise provided by you, to consider a request for compliance check. Failure to provide the information in full may result in delays in processing of the application.

Collection of personal information on this form is done in accordance with the privacy legislation contained within the *Information Act 2002 (NT)*. For more information please refer to the Department of Planning and Infrastructure privacy statement located at www.dpi.nt.gov.au

Any personal information provided can be subsequently accessed by you on request. If you have any queries please contact the Manager Development Assessment Services on 8999 6240.

FILE REFERENCE

PLANNER (NAME & SIGNATURE)

DATE