

| | |
|--|------------------------------|
| Contact Us | |
| The General Manager, 725 Pittwater Road, Dee Why NSW 2099 or Customer Service Centre, Northern Beaches Council DX9118 Dee Why | |
| Email | council@warringah.nsw.gov.au |
| Fax | 9942 2606 |
| If you need help lodging your application call Customer Service on (02) 9942 2111 or come in and talk to us at the Civic Centre, Dee Why. | |

| | | | | | | | | | | |
|------------------------|--|--|--|--|--|--|--|--|--|--|
| Office Use Only | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |


Part 1: Declaration

| | |
|--|--|
| 1. DECLARATION | |
| I hereby certify that the shadow diagrams submitted with the proposal at | |
| Address | 1162 Pittwater Rd Collaroy NSW 2097 |
| For the erection of <i>Description of development</i> | Construction of a new 2 storey dwelling house and associated works |
| <ul style="list-style-type: none"> • In accordance with the survey (prepared by a registered surveyor) which is required to be submitted with the application • Drawn to true north • Indicate shadow cast by the proposal at 9am, noon, 3pm, 21 June • To indicate the shadow cast by existing buildings and structures on the site and in the surrounding area | |

Part 2: Certification

| | | | |
|---|---|-----------|--|
| 2. CERTIFIER | | | |
| Title | <input type="radio"/> Mr <input type="radio"/> Mrs <input type="radio"/> Ms <input type="radio"/> Other | | |
| Full family name <i>(no initials) (or Company)</i> | Complete Thought Studio | | |
| Full given names <i>(no initials) (or A.C.N)</i> | 651 556 142 | | |
| Phone | 02 8040 4282 | Alternate | |
| Mobile | 0425 205 698 | Fax | |
| Qualification <i>(i.e. Architect, Planner, Computer Technician, Surveyor)</i> | Architect | | |

Part 3: Signature

| | |
|----------------------------------|--|
| 3. APPLICANT(S) SIGNATURE | |
| Signature |  |
| Date | 24.06.2022 |