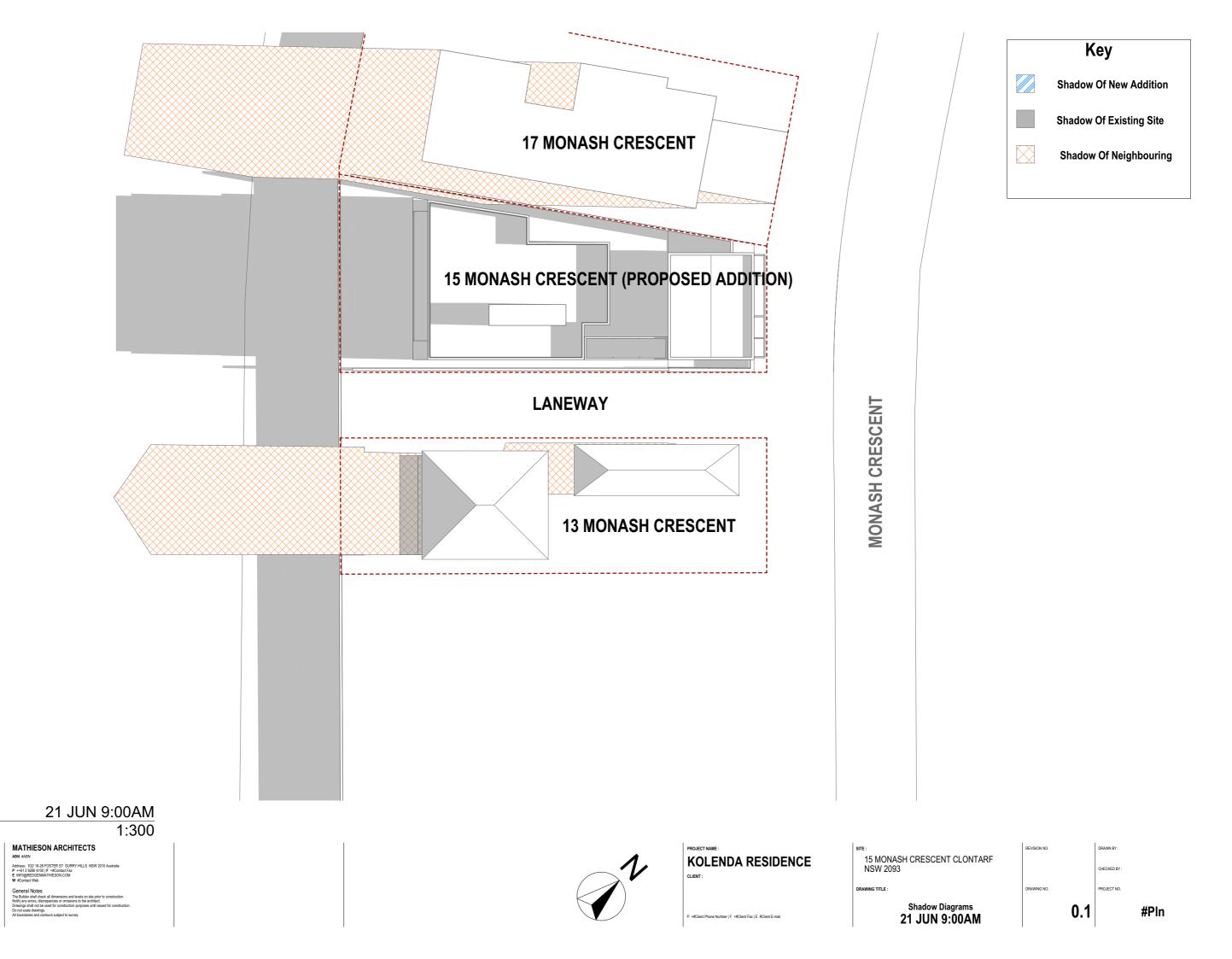


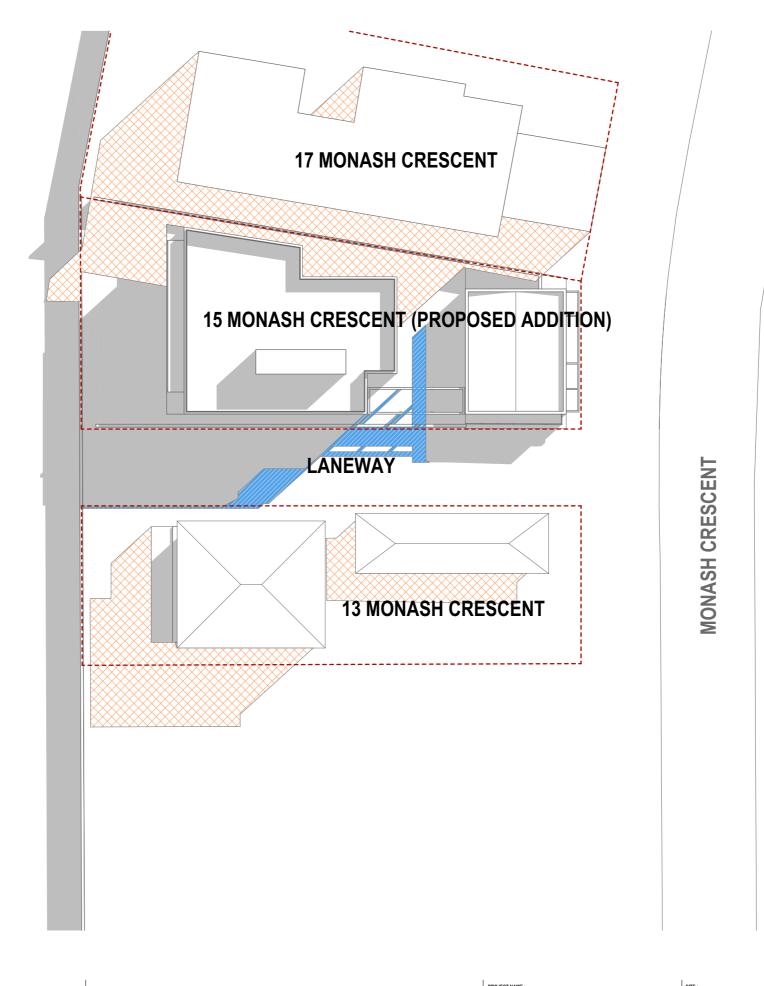
Date

CERTIFICATION OF SHADOW DIAGRAMS

MADE UNDER THE WARRINGAH LOCAL ENVIRONMENTAL PLAN 2000 OR 2001

Contact Us					Office Use Only												
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				1												
Fax	9942 2606	1															
	help lodging your application .11 or come in and talk to us																
Part 1: Dec	laration																
1. DECLAF	RATION																
I hereby cer	tify that the shadow diagram	ns submitted wit	h the proposa	l at													
Address																	
For the erection of Description of development																	
Drawn toIndicates	shadow cast by the proposal te the shadow cast by existir	at 9am, noon, 3	pm, 21 June						applica	ition							
2. CERTIF	IER																
Title		Mr	Mrs	Ms	Othe												
Full family n	name (no initials) (or Company)																
Full given na	ames (no initials) (or A.C.N)																
Phone					Alternat	e											
Mobile					Fax												
Qualification Technician, Surv	n (i.e. Architect, Planner, Computer reyor)																
Part 3: Sigr	nature																
3. APPLIC	ANT(S) SIGNATURE																
Signature		Digitally signed by Andrew Jakstas Date: 2019.10.03 14:27:12 +10'00'															





Key **Shadow Of New Addition Shadow Of Existing Site Shadow Of Neighbouring**

21 JUN 12:00PM 02 1:300

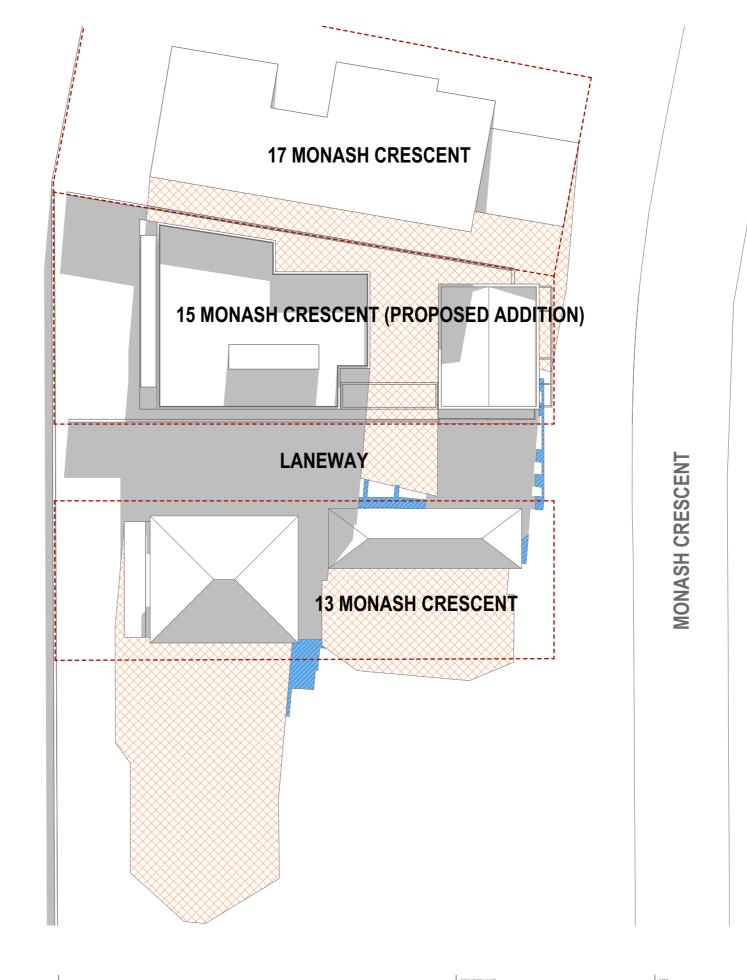
MATHIESON ARCHITECTS

KOLENDA RESIDENCE

15 MONASH CRESCENT CLONTARF NSW 2093

Shadow Diagrams 21 JUN 12:00PM

#PIn



Shadow Of New Addition

Shadow Of Existing Site

Shadow Of Neighbouring

03 21 JUN 3:00PM 1:300

MATHIESON ARCHITECTS

ABN #ABN

uddress: 102/16-28 FOSTER ST SURRY HILLS NSW 2010 Australia P ++61 2 9280 4100 | F +#Contact Fax E INF0@REDGENMATHIESON.COM

General Notes

The Builder shall check all dimensions and levels on site prior to construction. Notify any errors, discrepancies or omissions to the architect. Drawings shall not be used for construction purposes until issued for construction. Do not scale drawings.

KOLENDA RESIDENCE

+#Client Phone Number | F +#Client Fax | E #Client E-mail

15 MONASH CRESCENT CLONTARF NSW 2093

DRAWING TITLE

Shadow Diagrams 21 JUN 3:00PM

REVISION NO. DRAWN
CHECKE
DRAWING NO. PROJECT

.3

#PIn