

NEW APPLICATION FOR CONSTRUCTION APPROVAL

SECTION 1 DETAILS OF PROPERTY

LOT/PORION NUMBER

PROPERTY ADDRESS

REGISTERED OWNER/S

SECTION 2 APPLICANT

Note a person should not act as an agent for the owner unless they have been authorised in writing by the owner to do so.

NAME of APPLICANT
If a company provide a contact name

DAY TIME PHONE NUMBER MOBILE PHONE NUMBER

EMAIL ADDRESS

POSTAL ADDRESS

SECTION 3 DESCRIPTION OF WORK

TYPE OF CONSTRUCTION ACTIVITY

New	<input type="checkbox"/> 1	Conversions	<input type="checkbox"/> 4
Additions/Alterations	<input type="checkbox"/> 2	Demolition	<input type="checkbox"/> 5
Repairs & Maintenance	<input type="checkbox"/> 3	Removal	<input type="checkbox"/> 5

Please provide a brief description of the work and intended use

SECTION 4 BUILDER

OWNER BUILDER YES NO

SECTION 5 BUILDERS DETAILS

NAME of BUILDER

Eg. Owner-builder/building contractor

FIRM or COMPANY NAME (if applicable)

DAY TIME PHONE NUMBER MOBILE PHONE NUMBER

EMAIL ADDRESS

POSTAL ADDRESS

BUILDERS INSURANCE DETAILS:

NAME of INSURER

DAY TIME PHONE NUMBER MOBILE PHONE NUMBER

EMAIL ADDRESS

POLICY NUMBER

TYPE OF COVER (Please tick boxes which apply)

Public Liability Insurance 1 Construction Works Insurance 2 Contractors all Risk Cover 3

If other, please specify:

SECTION 6 CONSTRUCTION

TYPE OF CONSTRUCTION (Tick one box only)

Floating Pontoon with Vessel Mooring 1 Fixed Deck Only 2 Fixed Deck with Vessel Mooring 3

If other, please specify:

SECTION 7 CONSTRUCTION PLANS CHECKLIST

PERMITS AND PLANS (All boxes must be ticked)

Building Permit 1

Section 40 2

Compliance to Bayview Design Guidelines 3

SECTION 8 DECLARATION

I hereby :-

- Apply for construction pursuant to *the By-laws* to construct/demolish/remove building work in accordance with the accompanying plans;
- Accept that failure to supply information required on this form or otherwise required for this application may delay processing of this application.

Dated this _____ day of _____ 20__.

Signature – Applicant

OFFICE USE ONLY

PLANS RECEIVED YES NO

SECTION 40 YES NO

BUILDERS INSURANCE YES NO

COMMITTEE APPROVAL YES NO

WORKS APPROVED AS PER DRAWING NUMBER/S _____

APPROVAL GRANTED YES NO

Dated this _____ day of _____ 20__.

Signature – Signed by the Chair on behalf of the Committee

PRIVACY

The Bayview Marina Manager is authorised under the Bayview Management Corporation to collect the information on this form or otherwise provided by you. Any information you provide is on a voluntary basis and will remain *private and confidential* but is needed to process your application. If you have any queries please contact the Bayview Marina Manager 0477 661 130. Please carefully read through the Bayview Management Corporation By-laws by visiting <https://bayviewmarina.com.au/marina-info/>

For further information on Northern Territory Noise Management and Environmental Impact Assessment, please visit <https://ntepa.nt.gov.au/your-environment/noise> and <https://ntepa.nt.gov.au/your-business/environment-impact-assessment> to familiarize yourself with the NT Governments Guidelines.