



THE HILLS
Sydney's Garden Shire

THE HILLS SHIRE COUNCIL

3 Columbia Court, Norwest NSW 2153
PO Box 7064, Norwest 2153
ABN 25 034 494 656 | DX 9966 Norwest

8 December 2025

Mr Patrick Nash
Department of Planning and Environment
Uploaded to Planning Portal

Our Ref: 43/2025/PRE
Your Ref: SSD-96248991

Dear Mr Nash

Rouse Hill Hospital

Lots 311 and 312 DP 1274392, Lot 229 DP 1249147, Lot 101 DP 1060353, Lot 2011 DP 1131519, Commercial Road, Rouse Hill

The proposal has been reviewed and the following comments are provided for your consideration.

1. Development Comments

- a. Provide details of the internal layout of the hospital.
- b. Provide details of the planning pathway forward for the internal layout works for the hospital ie: use of exempt or complying development for internal partition works and fit-out.
- c. Provide confirmation of the number of beds within the hospital.
- d. Provide confirmation of the proposed number of staff, including overall staff numbers, maximum staff per shift, maximum staff during day time hours and any visiting medical officers.
- e. Undertake an assessment of the requirements for parking for a hospital under DCP Part C Section 1 – Parking.
- f. The proposal has not adequately addressed the non-provision of the link road between Hospital Road and Rouse Hill Drive. This matter was raised at the prelodgement meeting with the applicant on 19 October 2024. Concerns are raised that the Masterplan shows a road link from Rouse Hill Drive to Commercial Road (known as Orchard Road) which has been ear marked to be a public road in discussions regarding the development of the precinct. Should Hospital Road remain as a private road/driveway, this would be contrary to the Masterplan.

- g. Provide details of any proposed private medical suites ie: private consultation rooms.
- h. The proposed height and Clause 4.6 variation request are required to be reviewed by DPHI. Given that the height limit on the majority of the site is 32 metres, strong justification for the proposed height of 49 metres is required given the exceedance to the maximum height provisions of LEP 2019.
- i. Provide a detailed assessment of the proposal against the Rouse Hill Regional Centre Masterplan approved under 1604/2004/HB (as amended) and Precinct Plan 354/2013/HB.
- j. Concerns are raised in regard to the proposed extent of the works on Commercial Road and how these works will impact on Council's assets. The letter received on behalf of Health Infrastructure dated 3 November 2025 regarding the provision of notice in respect to owner's consent is noted. Notwithstanding this, you are requested to liaise with Council staff regarding any works which have the potential to impact on Council's assets.

2. Health Comments

- a. The Noise Vibration Impact Assessment report addresses road and traffic noise, potential vibrations from the adjacent substation, operational noise, including mechanical services, ambulance movements, loading dock and multistorey carpark noise. The provided mitigation recommendations are considered suitable. Plant selection has not yet been made, further assessment is required to be carried out during the detailed design phase to confirm any control measures. The preparation of a Construction Noise and Vibration Management Plan will be required for construction works.

The report also makes recommendations for the building construction such as avoidance of polished concrete for the multistorey carpark to avoid substantial tyre noise generated with this type of floor, and solid sections of the façade to have minimum sound reduction index of Rw50 to protect from external noise intrusion. These recommendations should be considered prior to development of final plans, and also be included in the Mitigation Measures document

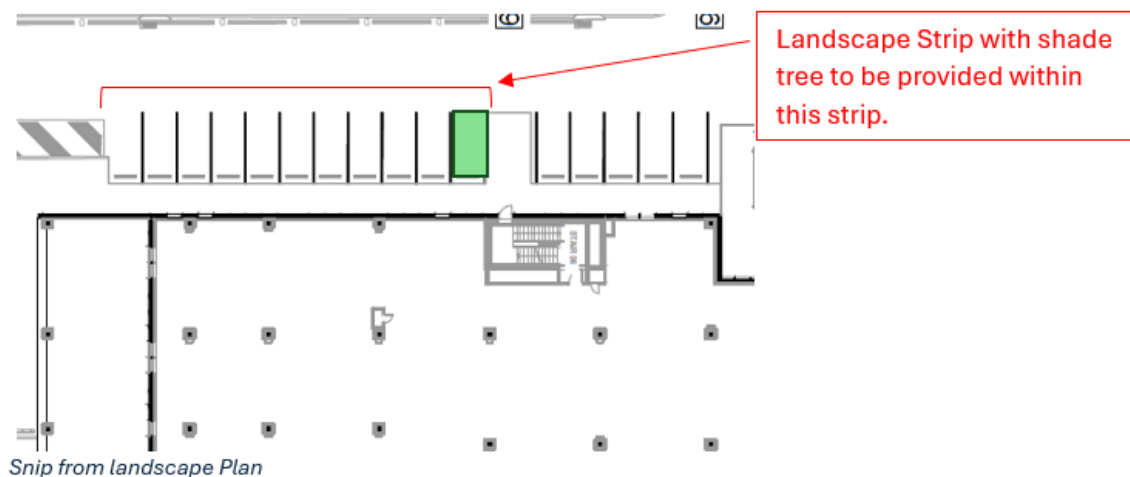
- c. The Rouse Hill Hospital Site Investigation report recommended additional targeted sampling then site-specific Tier 2 Human Health Risk Assessment to address NEPM framework. If risks are found to be unacceptable, a Remedial Action Plan (RAP) will be required and long-term Environment Management Plan (EMP) if required. An Unexpected Finds Protocol (UFP) is required for all areas.
- d. The report Dryland Salinity and Acid Sulfate Soil Assessment recommends additional investigation for works to be carried out along Commercial Rd, shared pathway and DPHI sites and a Salinity Management Plan (SMP) be prepared. The Mitigation Measures document states that the Salinity Management Plan will be implemented during all construction activities. The recommendations of the SMP, including ongoing management, should be implemented.

3. Resource Recovery Comments

As outlined in the Waste Management Plan, the Operational and Construction Waste Management Plans must be updated as main plans progress.

4. Landscape and Tree Comments

- a. Trees 43–46, identified as *Corymbia maculata*, are of high retention value and currently function as street trees along Commercial Road. Removal of these trees may be justified with measures implemented to replace them through the proposed landscape design. Replacement planting must achieve equivalent canopy contribution and comply with relevant council and AS 4970:2025 – *Protection of Trees on Development Sites* requirements.
- b. Provide quantities in the planting schedule
- c. Ensure that any planting above basement extents, OSD, or on slab are in accordance with The Hills DCP 2012 Part C Section 3 – Landscaping minimum soil depth requirements where:
 - i. 1.2m for large trees, 1m for medium trees, and 800mm for small trees.
 - ii. 500-600mm for shrubs.
 - iii. 300-450mm for groundcovers.
 - iv. 200mm for turf.
- d. Note: this is the soil depth alone and not the overall depth of the planter, and that mounding to achieve soil depth is not supported.
- e. Ensure that fencing is integrated with landscaping with variations in the planting to provide an attractive street frontage. All boundary fencing/walls fronting a street are to be set back a minimum of 2 metres, to allow for landscaping.
- f. As per DCP Part C Section 3.12. Car parking -(c) Outdoor parking areas are to be screened by a minimum of two metre wide landscaping strips. Such landscaping is to be of a mature and dense nature.
- g. Car parking to be designed in accordance with THSDCP Part C Section 3 – Landscaping Clause 3.12 Car Parking, and Part C Section 1-Parking. Two metre wide Landscape strips are to be provided between rows served by different aisles and between spaces at a rate of one in every ten car parking spaces. Shade trees are to be provided within the landscape strips. (See snip Below)



6. **Forward Planning Comments**

With respect to infrastructure, it is noted that the application seeks an exemption from contributions and submits that this request is supported by Planning Circular (25-002) relating to Crown Development Applications. However, the Circular refers to conditions of consent which may be appropriate to impose on Crown developments and specifically notes that for health services developments, contributions toward drainage infrastructure and local road upgrades are appropriate categories of contributions to levy Crown developments that are providing an essential community service.

As such, Council staff do not support an exemption from development contributions with the SSDA and does not accept the Applicant's position that the community benefits of the development outweigh the need to provide essential infrastructure when that demand for infrastructure is generated. The community would ultimately pay the cost of providing this infrastructure in the absence of payment from this Developer. Payment should therefore be made in accordance with The Hills Section 7.12 Contributions Plan, which notably does not provide exemptions for health services facilities. A Cost Summary Report is required to be prepared and submitted with the SSDA to enable the consent authority and Council to calculate appropriate contributions and impose appropriate conditions to levy the development under this Plan.

In addition to payment under The Hills Section 7.12 Contributions Plan, The Hills Rouse Hill Precinct Plan identifies the need for infrastructure improvements as a result of the growth specifically identified in the Rouse Hill Precinct, where the subject site is located. Road network improvements are identified in the immediate vicinity of the site, as well as the provision of a pedestrian bridge to improve connectivity from the Rouse Hill Metro Station. These infrastructure items are not funded through Council's Section 7.12 Contributions Plan and as such, an appropriate infrastructure mechanism should be proposed by the Applicant to secure funding towards these items. This is particularly important given the significant mode shift towards public transport usage that has been relied upon within the SSDA material. Given this, the Hospital development should contribute towards funding the pedestrian bridge, which is a key piece of unfunded infrastructure that will provide a direct pedestrian connection from the Rouse Hill Metro Station to the Hospital site. This is fundamental to ensuring that the Hospital becomes a broader social benefit to the community through ease of access and achieves the mode split outcomes identified within the SSDA material.

7. **Traffic and Transport Comments**

a. **Trip Rates**

The TAIA needs to provide evidence as to how the parking and trips rates were derived.

The report only provides sizes of site/development as shown below. More detailed information needs to be provided to assist in understanding how the trips rates were derived and any assumption associated.

Numerical Overview

Table 7 provides a numerical overview of the key elements of Rouse Hill Hospital.

Table 7 Numerical overview of the proposed development

Key element	Project
Site area (extent of works)	29,525m ²
Hospital site area	23,528m ²
Land use	Health Services Facility (Hospital) including ancillary functions
Gross Floor Area	
Integrated services hospital building	39,100m ²
Multi storey Carpark	13,750m ²
Maximum Building Height	
New Integrated Services Hospital Building	11 storeys, 49 metres (RL 101.17m)
Multi Storey Carpark	10 storeys, 29 metres (RL 83.98m)

The trips have been revised compared to the initial study however the size of the development has increased from 15,000m² to 39,100 m² (excluding the proposed multi-storey car park of 13,750 m² GFA). This represents more than a twofold increase in GFA. However, the corresponding revised trips have not increased in proportion to the increase in development size as expected. The revised trips have a marginal impact on the road network.

The TAIA provides parking spaces and person/vehicle trips however it says the rates are based on the Schedule of Accommodation (SoA), other project-specific information from Health Infrastructure, and profile surveys of other Sydney hospitals. No evidence has been provided to support these claims.

The peak parking demand is derived from the peak point of a graph in the study however there is no evidence showing how the demand and peak period axes were determined.

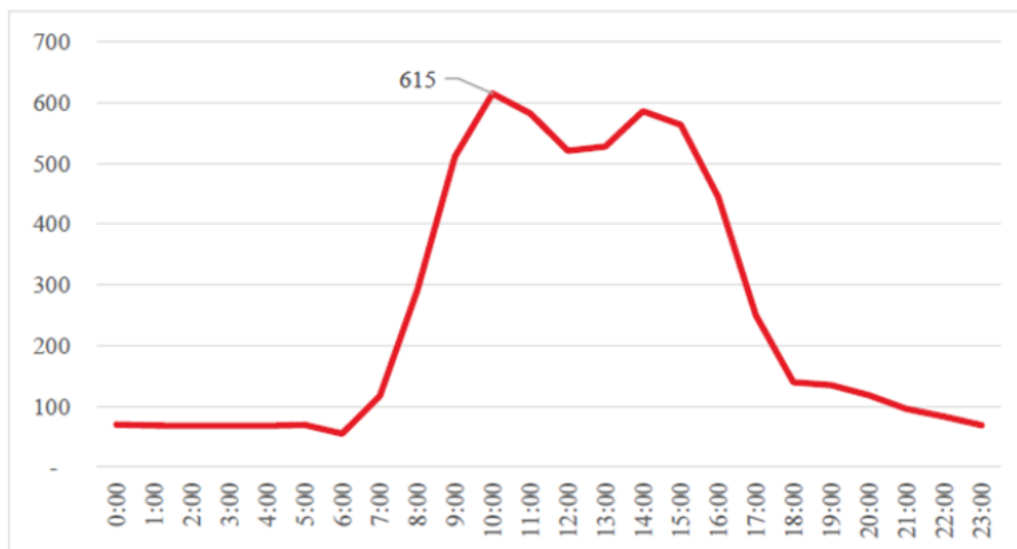


Figure 13: Daily parking accumulation profile for staff, patients and visitors

Similarly, the peak hour person and vehicle trips are also based on graphs produced by the applicant's traffic consultant with no supporting evidence.

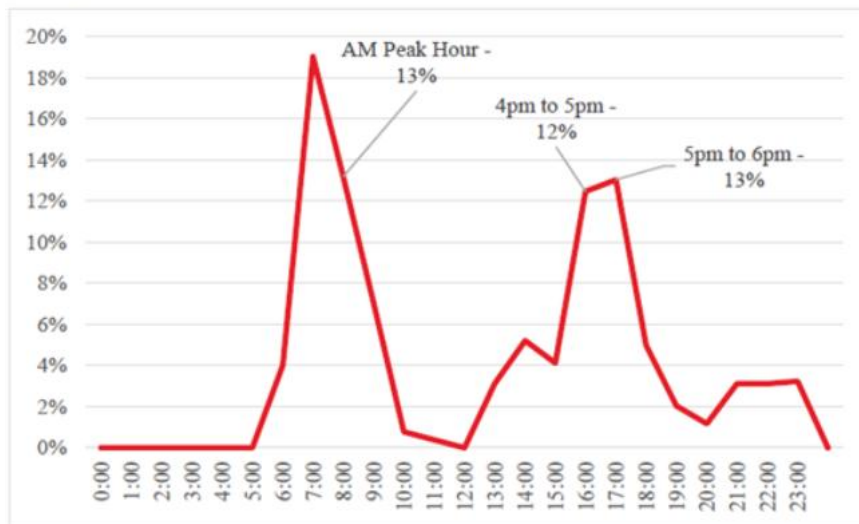
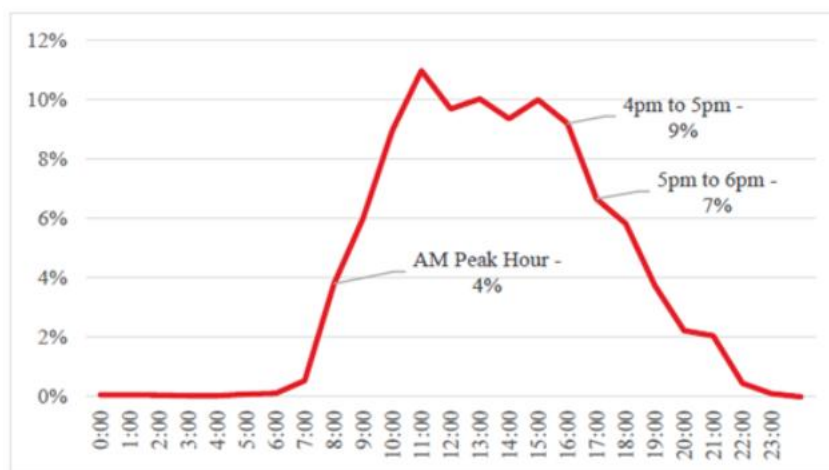


Figure 22: Daily departure/arrival profile for staff (note percentages are rounded)



b. Mode Split Assumptions

Evidence needs to be provided to support the mode split assumptions.

The vehicle trips are derived from the mode share percentage (as below).

Type	Car (driver) mode share	Vehicle occupancy
Staff	50% for daytime shift* 95% for nighttime shift	1.09 for daytime shift 1.0 for nighttime shift
Patients	84%	1.0
Visitors	60%*	1.2

The staff trips rates for the shifts needs clarity. Hospitals typically have three shifts with overlap between them which can impact both the AM and PM peak (particularly with school hours). The TAIA needs to capture shift-change peaks and related parking accumulation and access/egress spikes.

The 50% mode share for daytime staff is very low compared to:

- Blacktown Hospital Stage 1 and 2 which used a mode split of 83–88% for staff.
- ABS 2016 Census data for Rouse Hill–Beaumont Hills (SA2) of 88% (80% as driver and 8% as passenger)

The 60% mode share for visitors are also not realistic based on Council experience, and 80% is considered a more appropriate assumption.

c. Cumulative traffic impacts from nearby developments

The TAIA has not demonstrated it has considered the current cumulative traffic impacts from nearby developments of Northern Residential Precinct, Northern Frame Precinct, Rouse Hill Town Centre Expansion and Tallawong Station Release Area.

The Rouse Hill Northern Frame Precinct trip rates used were from the Rouse Hill Precinct Plan (original masterplan). The TAIA should use the GPT Planning Proposal for the Northern Frame Precinct which has significantly higher trip rates (approximately 1,394 AM, 1,438 PM, and 520 weekend trips) with a forecast of 15% of trips to use Commercial Road.

As the hospital proposal prohibits access from Commercial Road to the Rouse Hill Northern Frame Precinct, this 15% share (equivalent to approximately 200–215 weekday peak-hour vehicle trips) is expected to be redistributed to Rouse Hill Drive. This redistribution has the potential to increase queuing on Rouse Hill Drive, affecting the Northern Frame Precinct access as well as the Windsor Road intersection (including the T-Way) and the Caddies Boulevard intersection.

It is recommended that the traffic impact assessment incorporate the traffic generation forecasts from the Northern Frame Precinct Planning Proposal and assess the broader impacts on Rouse Hill Drive that may arise from the removal of Commercial Road access due to the proposed hospital layout.

The proposed intersection at the hospital access with Commercial Road includes the closure of the right-turn access from Commercial Road into the Fiddler Hotel (in order to facilitate the right-turn lane into the hospital). ***The TAIA should assess the impacts of this turn closure and consult with the hotel landowner.***

Council is in the process of updating its in-house traffic study and modelling for the extended Rouse Hill Precinct Area, which was previously undertaken using the applicant's interim data. The study is expected to be finalised before 18 December 2025 and will be provided to the applicant as part of the process to understand how the trips rates were derived and the forecast impact to the road network.

d. Pedestrian Trips

The pedestrian trips need to be forecasted including an assessment of the walking routes to/from Rouse Hill interchange/bus stops including performance of pedestrian crossings phases/delay. The development is likely to generate significant pedestrian trips.

The proposal has not included any walking and cycling analysis. Based on the assumed mode shares of 50% for daytime staff, 84% for patients, and 60% for visitors, the development is expected to generate approximately 145 AM peak and 158 PM peak pedestrian and cycling trips (i.e., trips made by modes other than the private car).

The pedestrian bridges over Commercial Road and Rouse Hill Drive identified in the Rouse Hill Precinct Plan continue to be supported by Council.

The bridges provide pedestrian connectivity between the trip generators on the northern side of Commercial Road, Rouse Hill Northern Precinct and Rouse Hill Town Centre including the station and bus interchange.

The nearest alternative crossing on Commercial Road is at Windsor Road and Commercial Road intersection. The nearest alternative crossing on Rouse Hill Drive is at Windsor Road and Rouse Hill Drive intersection. Both are likely to have long pedestrian waiting times due to the traffic performance of the intersections.

The design of the pedestrian bridges is yet to be determined with a recommendation that they incorporate lifts rather than long ramps, with potential for high level bridges directly into adjacent developments where possible. ***Land for the pedestrian bridges will need to be dedicated by developers.***

The ongoing maintenance of pedestrian lift needs to be determined, with Council preference for State Government to provide to be responsible for lifts at Rouse Hill Drive as it will be highly utilised by hospital visitors and staff and form an integral part of Rouse Hill interchange.

The NSW Government has allocated \$10 million for planning critical upgrades to Windsor Road at the future Rouse Hill Hospital site and it is recommended that the pedestrian bridge be included in the overall infrastructure budget. It is noted that the Australian Government has committed \$200 million for broader Windsor Road upgrades, contingent on matching NSW funding.

e. Car and Bicycle Parking

The number of beds or employees needs to be provided to determine the number of car parking spaces to be provided. A proportion of spaces capable of providing vehicle EV recharge facilities, it is suggested that this is between 5-10% of spaces.

The level of cycle parking at 10 spaces is too low. The basis of the rate needs to be provided. Staff bicycle parking needs to include secure parking and shower facilities. Visitor bicycle parking needs to be provided separately.

f. Bus services and infrastructure

The public transport trips need to be forecasted including an assessment of the walking routes to/from Rouse Hill interchange/bus stops including performance of pedestrian crossings phases/delay.

In addition, there needs to be an assessment of bus reliability due to the impact of generated traffic and the need or otherwise of bus priority. Bus reliability impacts on bus attractiveness and mode split assumptions.

It is noted that TfNSW's preference is a bus routes from Rouse Hill northern bus layover to Commercial Road through the RHH site.

g. Travel Plan

The scope of the Travel Plan needs to be clarified.

Best practice travel plans are usually finalised post occupation once travel patterns are understood through travel surveys. Travel behaviour change programs can then be developed to response to known behaviours. Travel Plans prepared before occupation tend to capture mitigating measures to encourage/enable preferred mode split identified through the transport impact assessment process and have little impact on travel behaviour change as travel behaviours have not yet been established or understood.

h. Upgrade of Local Road Infrastructure

The development does not adequately address the impact on the already under pressure local road network. While the federal government has announced a \$200 million commitment towards Windsor Road upgrades, this funding is contingent on Transport for NSW completing a \$10 million study to identify required infrastructure improvements within the precinct, and on the NSW State Government agreeing to match the federal contribution dollar for dollar.

Even if these conditions are met, the hospital development itself provides no clarity on how surrounding roads, including Commercial Road, Caddies Boulevard, and the connecting corridors through Box Hill, Gables, North Kellyville, and the Kellyville and Bella Vista Transit Oriented Development precincts will be upgraded to accommodate the significant increase in traffic demand. These areas are experiencing rapid housing growth as part of the North West Growth Precinct, which is already adding substantial pressure to the local road network.

Without a clear identification of infrastructure improvements to not just Windsor Road, but the local road network, Council has concerns about the currently proposed infrastructure items of being incapable of supporting the patronage to the hospital.

8. **Waterways Comments**

The site is not a flood-controlled land and is therefore not subject to Council's DCP Part C Section 6 – Flood Controlled Land.

Additionally, there are berms/mounds along the southern edge of Commercial Road and the eastern edge of Windsor Road that, in addition to the roads, would prevent external overland flows from reaching the subject site. Overland flooding and the potential for it to be redirected or obstructed by the proposed hospital development is insignificant and is therefore not seen as an issue for the site.

However, the entry into basement carparking levels (if any) need to be protected from local overland flows within the driveway/private road up to the probable maximum flood (PMF) event. This can be investigated through a desktop analysis not a full flood study.

9. **Ecology Comments**

There is a remaining patch of Cumberland Plain Woodland just outside the north-west portion of the subject land that has been assessed within the Arboricultural Impact Assessment (AIA) (ECM DSI 22292835). The AIA proposes tree protection fencing around

this area, and the layout of the site shed zone has been changed from the Early Works REF to locate sheds further away from the vegetation.

It is recommended that the area proposed for car parking should be set at a 3-5m distance from the TPZ identified within the AIA to ensure the developments impacts do not have negative effects on the remaining vegetation

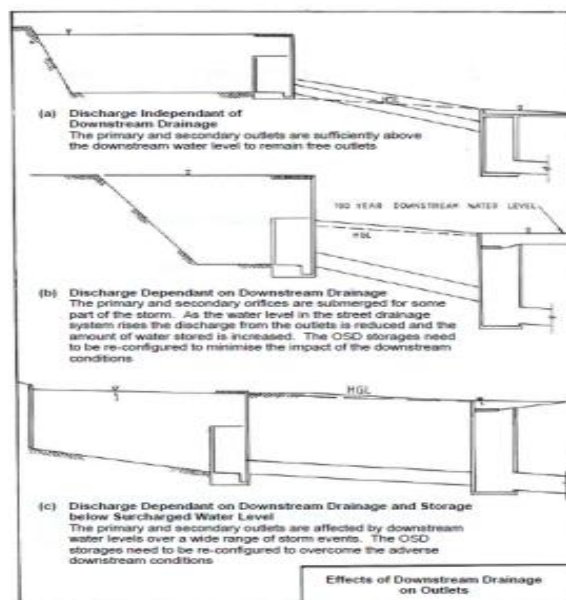
10. **Engineering Comments**

Stormwater:

- Concentrating stormwater surface flows into the adjoining site will not be permitted. The proposed dispersion trench is not supported. Refer to Section 4.4 - Lawful Point of Discharge of Council's Design Guidelines Subdivisions/ Developments.
- The design of the stormwater including Water Sensitive Urban Design shall be consistent with the approved stormwater management strategy under Masterplan DA 1604/2004/HB (as amended) and DA 354/2013/HB (as amended).
- The capacity of the stormwater system into which stormwater from the development discharges into, must be checked/analysed. Please note that the check/analysis shall be carried out to the legal point of discharge to ensure that the street pits will not be surcharged during minor events up to the 10 years ARI storm event and up to the 20 years ARI storm event for the sag pit.
- The Rainfall Intensities shall be consistent with Section 4.10 Council's Design Guidelines Subdivisions/ Developments. Similarly, the duration of the analysis shall be extended to 72 hours.
- Any proposed work on Council's land/road due to the proposed development shall be prepared and provided in accordance with Council's Design Guidelines Subdivisions/ Developments and Works Specifications Subdivisions/Developments.
- The OSD, water quality and rainwater tanks shall be shown on the civil plans and relevant section plans. OSD and rainwater tanks are permitted on common areas only. Rainwater tank and OSD underneath the hospital building will not be supported.
- Any proposed work on Council's land/road due to the proposed development shall be subject/ requires separate approval from Council beforehand via Section 138 of the Roads Act 1993.
- When OSD, Water Sensitive Urban Design elements and rainwater tanks are provided for the development, Positive Covenant/Restriction-as-to-use – legal protection is required to be placed on a property title requiring owners to repair and maintain the OSD systems.
- Catchment plan (including internal and external), pipe sizes, design and existing levels shall be shown on the plans.
- Cross-catchment/redirection of catchment flow is not permitted. The design shall include two separate OSD's/construction sediment basins.
- The Water Sensitive Urban Design elements must demonstrate a reduction in annual average pollution export loads from the development site in line with the following environmental targets:
 - 90% reduction in the annual average load of gross pollutants
 - 85% reduction in the annual average load of total suspended solids
 - 65% reduction in the annual average load of total phosphorous
 - 45% reduction in the annual average load of total nitrogen
 - All model parameters and data outputs are to be provided.
- Any proposed retaining wall shall be designed such that it accepts and caters for any surface runoff from the up slope adjoining land in a 'failsafe' manner without affecting

any other property. No diversion or concentration of stormwater surface flows will be permitted. Any proposed retaining wall including footing and subsoil drain shall be designed and constructed fully inside the property boundary.

- Civil Engineering plans shall be prepared and provided as part of the submission. This shall include but not limited to full road's width, long section, cross-section, earthworks, extent of the cut/full, drainage, services, etc. Earthwork plans, cut and fill, and retaining wall shall be provided on a separate plan.
- Geotechnical report will need to assess the groundwater and shall report the extraction/removal volume from the development per year during construction phase and ongoing operation/post development. If the extraction/removal volume from the development per year during construction phase and ongoing operation is found to be less than 3ML per year for the whole site then exemptions might be granted. Refer to the link below for further details: Groundwater WAL exemptions for 3ML and Botany Sands | NSW Dept of Natural Resources Access Regulator. If the extraction/removal volume from the development per year during construction phase and ongoing operation is found to be more than 3ML per year for the whole development, then either any basement will need to be tanked or amend the application and provide concurrence from NRAR regarding the basement design.
- Details of what the applicant is proposing with respect to stormwater design is required (i.e Lawful Point).
- With respect to the above, the OSD and water quality will not be supported over future public roads, therefore, the OSD and water quality chamber shall be located within private land
- Check whether the OSD is impacted by Drowned outlets. Refer to Figure 6.3 of the On-site Stormwater Detention R3, of the Handbook Upper Parramatta River Catchment Trust, and the snapshots below:



Options "B and C" will not be supported, therefore, ensure the depth of the OSD is reduced and Options "B and C" are avoided

- Max gutter width is 2.5m for the 100 years stormwater with max 200mm bonding depth and shall not be extended into private land.
- Any discrepancy or non-compliance with the Council's Design Guidelines for Subdivision/Developments (dated December 2023) or the relevant Council DCP—

particularly regarding civil works, stormwater, traffic, and access—may result in the refusal of a future Section 68 permit application.

Road layout and traffic:

- A Traffic report prepared by a suitably qualified traffic engineer shall be provided with the application. A traffic report will be required addressing sight distance, driveways, ramps, circulation aisles, car park areas, clearance heights etc.
- The design of the internal road and site access shall comply with Part D Section 6 Rouse Hill Regional Centre and the Precinct Plan DA 354/2013/HB (as amended).
- Minimum Sight Distance Requirements (MSDR) and Minimum Gap Sight Distance (MGSD) (including sight distance for pedestrian) shall comply with relevant AS/ NZS 2890.1, AS 2890.2 and AS/ NZS 2890.6 and Ausroad.
- Footpath and shared pathway shall be shown on the plans and shall be connected to an existing footpath and shared pathway.
- The proposed road layout is inconsistent with the Part D Section 6 Rouse Hill Regional Centre and the Precinct Plan DA 354/2013/HB (as amended), which is not supported.
- The note on the civil plans which states “note: only construct roads and bulk excavation are included in the early works kerbs, gutters, footpaths, final road build up and surface are not included in early works and are shown only for information” the future surface levels can only be vary by 100mm or less is required to be clarified. The surface level will be fixed by this Development Application approval hence the earthwork plan, cut and fill, and retaining wall (including ToW, BoW, long section) shall be provided on a separate plan any batter shall be 1:4.
- Details are to be provided for the expected longest vehicle type that will access the driveway/basement (e.g. MRV/HRV).
- Carpark layout driveways, and aisles are to be designed according to the relevant Australian Standards. AS/NZS 2890.1:2004, AS 2890.2-2002 and AS/NZS 2890.6:2009. All dimensions are to be clearly labelled on the plans. Plans should also clearly identify if they are dedicated to visitors or staff. All dimensions are to be detailed on the plan including the parking spaces relevant to the user classification.
- A cross-section plan of all ramps will need to be provided on plan; it must detail the gradient and the rate of grade change compliance with the relevant Australian Standards.
- Submit swept turning paths demonstrating the required manoeuvring in order for longest vehicle to enter and leave the site in a forward direction.
- The driveway width must be designed to facilitate expected longest vehicle type and a B99 car pass each other simultaneously (i.e. maintaining two-way traffic flow).
- It was indicated that Hospital Road would remain as a private road/driveway and would only provide access between the hospital site and Commercial Road. Concerns are raised that the Masterplan shows a road link from Rouse Hill Drive to Commercial Road (known as Orchard Road) which has been earmarked to be a public road in discussions regarding the development of the precinct. Should Hospital Road remain as a private road/driveway, this would be contrary to the Masterplan. Should Hospital Road be proposed as a private road, agreement is required to be provided from GPT for a private road.
If Hospital Road is proposed as a public road, the design, construction and future maintenance shall comply with Council's Design Guidelines Subdivisions/ Developments and construction specification.

- It is recommended that further consultation occur between Health Infrastructure, Transport for NSW, Council and GPT with respect to the access arrangements for the future hospital and the surrounding existing and proposed road network.
- Any discrepancy or non-compliance with the Council's Design Guidelines for Subdivision/Developments (dated December 2023) or the relevant Council DCP—particularly regarding civil works, stormwater, traffic, and access—may result in the refusal of a future Section 138 permit application.

Should you wish to discuss the above please contact me on 9843 0319.

Yours faithfully

A handwritten signature in black ink, appearing to read 'K McKenzie', with a stylized, flowing script.

Kristine McKenzie
PRINCIPAL CO-ORDINATOR