

# Request to modify a major project



NSW GOVERNMENT  
Department of Planning

Date duly made: \_\_\_\_/\_\_\_\_/\_\_\_\_

Modification No. \_\_\_\_\_

## 1. Before you lodge

This form is required under section 75W of the *Environmental Planning and Assessment Act 1979* (the Act) in order to request the Minister to modify the Minister's approval to carry out a project or concept plan to which Part 3A of the Act applies.

Before making this request, it is recommended that you first consult with the Department of Planning (the Department) concerning your modification. The Director-General may issue environmental assessment requirements that must be complied with before your request will be considered by the Minister. If the changes proposed by the modification will result in a project that is consistent with the existing approval, the Minister's approval for a modification is not required.

### Disclosure Statement

Persons making a request to modify a project or concept plan are required to declare reportable political donations (including donations of or more than \$1,000) made in the previous two years.

Note: For more details about political donations disclosure requirements, including a disclosure form, go to [www.planning.nsw.gov.au/donations](http://www.planning.nsw.gov.au/donations).

### Lodgement

All modification requests must be lodged with the Director-General of the Department of Planning, by courier or mail. An electronic copy should also be e-mailed to the assessment contact officer assigned to the project.

NSW Department of Planning  
Ground floor, 23-33 Bridge Street, SYDNEY NSW 2000  
GPO Box 39 SYDNEY NSW 2001  
Phone 1300 305 695

## 2. Details of the proponent

Company/organisation/agency

INDIGENOUS LAND CORPORATION

ABN

59 912 679 254

☒ Mr ☐ Ms ☐ Mrs ☐ Dr ☐ Other

First name

ASHLEY

Family name

MARTENS

Position

DIRECTOR CAPITAL WORKS

STREET ADDRESS

Unit/street no.

Level 2, 67

Street name

ASTOR TERRACE

Suburb or town

SPRING HILL

State

QLD

Postcode

4000

POSTAL ADDRESS (or mark 'as above')

GPO Box 5212

Suburb or town

BRISBANE

State

QLD

Postcode

4001

Daytime telephone

(07) 3854 4600

Fax

(07) 3854 4666

Mobile

0409699462

Email

ashley.martens@ilc.gov.au

### 3. Identify the land

STREET ADDRESS (where relevant)

Unit/street no.

180

Street or property name

GEORGE ST

Suburb, town or locality

REDFERN

Postcode

2016

Local government area(s)

CITY OF SYDNEY

State Electorate(s)

HEFFRON

REAL PROPERTY DESCRIPTION

Note: The real property description is found on a map of the land or on the title documents for the land. If you are unsure of the real property description, you should contact the Department of Lands.

Please ensure that you place a slash (/) to distinguish between the lot, section, DP and strata numbers. If the proposed modification applies to more than one piece of land, please use a comma to distinguish between each real property description.

OR: detailed description of land attached: ☐

MAP: A map of the site and locality should also be submitted with this request.

### 4. Details of the original major project or concept plan

Briefly describe what the original approval allows

National Indigenous Development Centre comprising a new multi purpose building; swimming pool; multi code football field; adaptive reuse of existing school buildings for educational, commercial and dormitory uses; demolition of existing toilet blocks and associated landscaping.

What was the original project application no.?

MP 06\_0267

What was the date of the approval?

4 October 2007

What was the original application fee?

\$62,806.00

Note: Clause 245K of the *Environmental Planning and Assessment Regulation 2000* provides information on calculating the maximum fee for a request for modification.

### 5. Describe the modification you propose to make to the approval

Describe the proposed modification

Extension of closing time from 10.00pm to 12.00am for sixteen Friday nights per year.

Your modification request may need to be accompanied by an Environmental Assessment, including plans. An electronic and hard copy of this document will be required.



#### ESTIMATED CAPITAL INVESTMENT VALUE

Please indicate the estimated capital investment value (CIV) of the modification to the project approval or concept plan (excluding GST).

\$750

#### FULL TIME EQUIVALENT JOBS

Please indicate the number of jobs created by the proposed modification. This should be expressed as a proportion of full time equivalent (FTE) jobs over a full year.

Construction jobs (FTE)

Refer  
original  
approval

Operational jobs (FTE)

Refer  
original  
approval

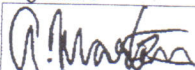
#### 6. Landowner's consent (where required)

As the owner(s) of the above property, I/we consent to this request being made by the proponent:

Land

180 George Street, Redfern

Signature



Name

Ashley Martens - Director  
Capital Works

Date

Monday 1 February  
2010

Land

Signature

Name

Date

Note: Under Clause 8F of the *Environmental Planning and Assessment Regulation 2000* (the Regulation), certain applications for approval under Part 3A of the Act do not require consent of the landowner, however, the proponent is required to give notice of the application (e.g. linear infrastructure, mining & petroleum projects, and critical infrastructure).

#### 7. Political donation disclosure statement

Persons making a request to modify a project or concept plan are required to declare reportable political donations (including donations of or more than \$1,000) made in the previous two years.

Have you attached a disclosure statement to this request?

☐ Yes

☒ No

Note: For more details about political donations disclosure requirements, including a disclosure form, go to [www.planning.nsw.gov.au/donations](http://www.planning.nsw.gov.au/donations).

#### 8. Proponent's signature

As the proponent(s) of the project and in signing below, I/we hereby:

- provide a description of the modification to the project approval or concept plan and address all matters required by the Director-General pursuant to Section 75W of the Act, and
- declare that all information contained within this form is accurate at the time of signing.

Signature

*A. Martens*

Name

ASHLEY MARTENS

Date

1 February 2010

In what capacity are you signing if you are not the proponent

Name, if you are not the proponent