# Request to modify a major project



Date duly made:/	_/ Modification No.	MP08_	_0194	(MOD	6)
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## 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.

#### 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

### **Details of the proponent** Company/organisation/agency ABN PROJECT 28 PTY LTD 61 009 919 613 ☐ Mr ☐ Ms Mrs ☐ Dr Other First name Family name Position STREET ADDRESS Unit/street no. Street name CAVILL AVENUE 46 Suburb or town State Postcode SURFERS PARADISE QLD 4217 POSTAL ADDRESS (or mark 'as above') P O BOX 1914 Suburb or town State 4217 SURFERS PARADISE QLD Daytime telephone Mobile 07 5570 5500 07 5570 5050 0467 492311 Email mgeale@ledaholdings.com.au

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3.	Identify the land						
	STREET ADDRESS (where relev	REET ADDRESS (where relevant)					
	Unit/street no.	Street or	property name				
		DEPO	OT ROAD				
	Suburb, town or locality				2487		
	KINGS FOREST, KIN	<u>IGSCL</u>	IFF				
	Local government area(s)		State Electorate(s)				
	TWEED		TWEED				
	REAL PROPERTY DESCRIPTIO						
	SEE ATTACHED SCI	E ATTACHED SCHEDULE					
	Note: The real property description is of the real property description, you shall be a second or second o	hould contac	ct the Department of Lands.		•		
	Please ensure that you place a slash modification applies to more than one description.						
	OR: detailed description of land a	ıttached: 🗵	3				
	MAP: A map of the site and loca	ality shou	ld also be submitted witl	n this request.			
4.	Details of the original m	najor pr	oject or concept p	lan			
	Briefly describe what the original a	approval a	llows				
	Kings Forest Residential Subdivision Stage 1 Bulk Earthworks, Roadworks and						
	Subdivision of Precinct 5, including:						
	- subdivision of the site in		•	1 stages;			
	- bulk earthworks across the site;						
	- roadworks comprising:						
	. construction of the entrance road and associated intersection works with						
	Tweed Coast Road.						
	What was the original project application no.?	What v	was the date of the val?	What wa	as the original ion fee?		
	08_0194	11 A	AUGUST 2013				
	Notes Clause 245K of the Environment	ntal Blannin	er and Assessment Danielation	2000idaa is			
	Note: Clause 245K of the <i>Environmental Planning and Assessment Regulation 2000</i> provides information on calculating the maximum fee for a request for modification.						
5.	Describe the modification	on you	propose to make t	o the deve	lopment		
	Describe the proposed modification						
	Modification of Major Project Approval MP08_0194 (MOD 6) to amend Conditions 26 - Intersections, 116 – Bushfire Management & 154(c) – Section 94 Contributions for Tweed Road Contribution Plan as described in the accompanying Report DAC Plannin						
	Pty Ltd, August 2017.						
	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 INVESTM	ESTIMATED CAPITAL INVESTMENT VALUE Please indicate the estimated capital investment value (CIV) of the modification to the project approval or					
	concept plan (excluding GST).	concept plan (excluding GST).					
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	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 fu	ull year.			
	Construction jobs (FTE) NIL	Operational jobs (FTE) NIL			
6.	Landowner's consent (where require	ed)			
As th	e owner(s) of the above property, I/we consent to this	s request being made by the proponent:			
	Land	Land			
	SEE ATTACHED SCHEDULE				
	Signature	Signature			
	See attached letter dated 22 August 2017	See attached letter dated 22 August 2017			
	Name	Name			
	WILLIAM ROBERT ELL DIRECTOR & SECRETARY	ROBERT JOHN ELL DIRECTOR			
	Date	Date			
	required to give notice of the application (e.g. linear infrastr	equire consent of the landowner, however, the proponent is ructure, mining & petroleum projects, and critical infrastructure).			
7.	Political donation disclosure statem	ent			
	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 disc www.planning.nsw.gov.au/donations.	losure requirements, including a disclosure form, go to			
8.	Proponent's signature				
	As the proponent(s) of the project and in signing below	ow, I/we hereby:			
	<ul> <li>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</li> </ul>				
	<ul> <li>declare that all information contained with</li> </ul>	hin this form is accurate at the time of signing.			
	Cimpatura	In what consoits are you signing if you are not the			
	Signature See attached letter dated 22	In what capacity are you signing if you are not the proponent			
	August 2017	See attached letter dated 22 August			
	Name	2017			
	WILLIAM ROBERT ELL				
	DIRECTOR & SECRETARY	Name, if you are not the proponent			
	Date	ROBERT JOHN ELL			
		DIRECTOR			

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