Design Review Panel Application

Document Number: 18/125639 / TRIM F18/596



About this form

This form shall be used if you are seeking to meet with Council's Design Review Panel (DRP). The Panel comprises of a number of independent architectural, urban design and landscape architectural experts / consultants to provide early feedback on your development proposal. All new commercial, industrial, multi-unit housing and residential flat buildings are required to be presented to the Design Review Panel at the Applicant's expense. The date of the meeting will be scheduled by Council and the Applicant will be informed via email of the date, time and venue.

Applicant Details								
Ms/Mr/Mrs/ Family					Given			
Other (please	e circle) Name					Name(s)		
Street No.		Street						
Suburb			· · ·			Postcode		
Company Na	ame (if appl	icable)						
Mailing Addr	ess (if diffe	rent)						
Daytime Telephone No. (Home/Work)			Mobile No.					
Email Addres								
Connection volume owner, builde								
Property De	etails							
Lot No(s)		Section	DP/SP			DP/SP Nu	Imber	
Unit No.		Street No.	lo. Street					
Suburb			Postco			Postcode		
Proposed D	evelopme	ent				1		l
Description of	of proposed	l development:						
Estimated cost of development (cost for erection of buildings / additions, demolition and carrying out of work)								
Applicant's Signature Date//						//		
Related development application								
Has a Pre-DA meeting been held?				No	If yes, pr	ovide Pre-DA No.		
Is this DRP being submitted with a DA?				No	If yes, pr	ovide DA No.		

Privacy Statement

ABN 80 690 785 443

The personal information provided on this form (including your name and other details) will be handled in accordance with the *Privacy and Personal Information Protection Act 1998* and may be available to the public under various legislation. Refer also to the Privacy Statement on Council's website.

Rockdale Customer Service Centre 444-446 Princes Highway Rockdale NSW 2216, Australia **Eastgardens Customer Service Centre** Westfield Eastgardens 152 Bunnerong Road Eastgardens NSW 2036, Australia ABN 80 690 785 443

T 1300 581 299 | 02 9562 1666 E council@bayside.nsw.gov.au W www.bayside.nsw.gov.au Postal address: PO Box 21, Rockdale NSW 2216

Des	Yes	N/A	Office Use	
	Lodge ng req	ement uireme	ents:	
1	a description of the proposed development providing a breakdown of the components of the proposal;			
2	survey plan including RLs and location of trees and any easements;			
3	site plan for the proposal, including the adjacent building / properties;			
4	detailed site analysis and locality plan;			
5	streetscape elevational plans;			
6	basic scaled floor plans of the proposal to enable an assessment;			
7	basic scaled elevations with RLs and relationship to neighbouring development;			
8	basic scaled landscape plan;			
9	basic scaled parking plan including swept path detail;			
10	shadow diagrams detailing shadows at 9am, 12 noon and 3pm at 22 June and the intermediate situation equinox (either 22 March or 22 September);			
11	a table showing compliance or otherwise with the relevant LEP & DCP;			
12	a Design Verification Statement prepared by a registered Architect in which the designer verifies:			
	- he/she has designed or directed the design of the development; and			
	 an explanation of the design in terms of the design quality principles set out in Part 2 of the State Environmental Planning Policy No 65 – Design Quality of Residential Apartment Development; and 			
13	a physical sample of proposed materials and finishes AND a 3D colour perspective. If the proposal is visible from another street or public area, then multiple 3D perspectives are to be submitted.			
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Office Use Only – Development Advisory Service								
Type of development		Multi dwelling housing Other major			Residential apartment			
Description of proposed development:								
Estimated cost of wor	ks:	<\$10mil (RDRP1)		\$10-\$50mil (RDRP2)		>\$50mil (RDRP3)		
Is a Design Excellenc	e fee req	luired	Yes			No		
Relate to Pre-DA	Yes – raise fee against Pre-DA (Pre-DA No) No					No		
Relate to DA	Yes – raise fee against DA (DA No) No					No		
Checked by					Date	//		

Office Use Only – Customer Service							
Receipt No.		Date	//				
Total fees received	\$						