

Address all correspondence to: The Chief Executive Officer, PO Box 42, Nowra NSW 2541 Australia

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## Notice of Completion of Installation – Install a Relocatable Home, Rigid Annexe or Associated Structure

## Guidance

The holder of an approval must provide a copy of the Site Diagram, Engineer's Certificate, Compliance Plate, and this form completed to Council within seven (7) days of completing the works.

If you have already provided the above-mentioned required documents during an application for approval to install, you are only required to provide this form completed.

1	Applicant Details						
□ Mr □	IMrs □ N	s   Other:	Name:				
Email:							
Telephone/ Mobile:							
Unit / Street No:			Street Name:				
Suburb:							
State:			Postcode:				
If Applicable fill out below:							
Entity Name:							
Entity ABN/ACN:							
Trading/ Business Name (if different from above):							
Trading/ Business Postal Address (as registered with ASIC):							
2	2 Description of Structure						
☐ Annexe				☐ Ensuite			
☐ Awning				□ Shed			
□ Carport				☐ Tropical Roof			
□ Deck				☐ Relocatable Home			
☐ Other (please describe):							
Office use only							
Receipt Number: Amount \$:							
Issue Date: 03/2021 Review Date: 07							
Next Review Date		9: 07/2024	F O R M 3 5 5 7				
Form No: 3557		Owned by: Env S	ervices				

3	Required Documents						
delineation coverage	agram - Demonstrating the setback, site not separation distances, and site of all structures not exceeding two thirds of the total site area.	NOTE: Notification will not be accepted unless all documents have been submitted.					
_	er's Certificate - Including the structural and design gust wind speed.	☐ Documents previously supplied with application for approval to install in relation to flood prone land.					
	ance Plate – A photo of or detail from ompliance plate.	Approval No:					
4.	Property Details						
□ Camping Ground □ Caravan Park □ Manufactured Home Estate □ Primitive Camp Ground							
Site Number of installation:							
Name of Ground / Park / Estate:							
Unit / Stre	et No:		Street Name:				
Suburb:							
State:			Postcode:				
5.	Manager - Note: If the Manager is the applicant write "applicant" below						
Name:							
Telephone	e / Mobile:	Email:					
6.	Managers Declaration						
I certify that the above installation complies with the Regulation. I/We hereby permit any duly authorised officer of the Council of the City of Shoalhaven to enter the premises to carry out an inspection as required for the administration of the Act(s) and Regulations.							
Managers	Signature:		Date:				
7.	Applicants Declaration						
I, the unde	ersigned declare that all information supplie	ed on this regi	stration form is true and correct.				
Applicant	Signature:						
	olgnature.		Date:				
Important	information		Date:				
			Date:				
Privacy & F Information Council Info available to Further info	information Public Access to Information	n information subvernment Information can be fo	uncil's Privacy Management Plan, Public Access to applied to and held by Council may be made rmation (Public Access) Act 2009 (GIPA Act). bund on Council's website:				
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