

PART 5 APPLICATION FOR APPROVAL

WHO USES THIS FORM?

This form is to be completed for all development requiring the approval of Sydney Ports Corporation under Part 5 of the *Environmental Planning and Assessment Act 1979*.

If you have any questions regarding this Form or the Planning Process, please contact Sydney Ports' Planning Department on (02) 9296 4999 or planning@sydneyports.com.au

BEFORE SUBMITTING THIS FORM

| | | |
|--|---|-----------------------------|
| Have you attended a Planning Application Meeting with Sydney Ports' planning staff? [if you have not attended a Planning Application Meeting, please contact the Planning Department], | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| If yes, does your proposal meet with all the requirements stipulated in the meeting? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| Have you included: <ul style="list-style-type: none"> <input checked="" type="checkbox"/> two (2) sets of plans, elevations, a site plan and locality plan; <input checked="" type="checkbox"/> two (2) copies of the Review of Environmental Factors; and <input checked="" type="checkbox"/> one (1) electronic copy of all of the above documentation? | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |

1. DETAILS OF PROPONENT

| | | | |
|--|-------------------------|--------------------------------------|------------------|
| Company / organisation / agency DP WORLD | | ABN 82 001 351 159 | |
| <input checked="" type="checkbox"/> Mr <input type="checkbox"/> Ms <input type="checkbox"/> Mrs <input type="checkbox"/> Dr <input type="checkbox"/> Other | | | |
| First name Mark | Family name Bellears | Position Director/General Manager | |
| Postal address 42 FRIENDSHIP ROAD | | | |
| Suburb/town MATRAVILLE | | State NSW | Postcode 2036 |
| Daytime telephone (02) 9394 0934 | Fax (02) 9394 0940 | Mobile 0417 646 635 | |
| Email mark.bellears@dpworld.com | | | |

2. DETAILS OF CONTACT PERSON FOR THE DEVELOPMENT PROPOSAL (IF DIFFERENT TO SECTION 1)

| | | |
|--|---------------------------------|--|
| Company / organisation / agency WORLEYPARSONS | | ABN 61 001 279 812 |
| Mr <input checked="" type="checkbox"/> Ms <input type="checkbox"/> Mrs <input type="checkbox"/> Dr <input type="checkbox"/> Other <input type="checkbox"/> | | |
| First name NICOLE | Family name COWLISHAW | Position SNR ENVIRONMENTAL SCIENTIST |
| Postal address PO Box 1812 | | |
| Suburb/town NORTH SYDNEY | State NSW | Postcode 2059 |
| Daytime telephone (02) 8456 7209 | Fax (02) 8923 6877 | Mobile |
| Email nicole.cowlishaw@worleyparsons.com | | |

3. DETAILS OF SITE AND PROPOSAL

| | | |
|---|---|-------------------------|
| STREET ADDRESS | | |
| Unit/street No. 42 | Street or property name FRIENDSHIP ROAD | |
| Suburb/town MATRAVILLE | State NSW | Postcode 2036 |
| Real property description (Lot/DP No.) LOT 6 DP1053768 | | |
| Brief description of proposal (please attach Review of Environmental Factors and associated documentation) INSTALLATION OF THREE (3) 'WEIGH IN MOTION' WEIGHBRIDGES AND ASSOCIATED ANCILLARY WORKS. | | |
| Estimated Capital Investment Value ~ \$1,000,000 — | | |
| <small>[Note: the Capital Investment Value includes all costs necessary to establish and operate the project, including the design and construction of buildings, structures, associated infrastructure and fixed or mobile plant and equipment (but excluding GST and land costs)]</small> | | |

4. HARBOUR MASTER APPROVAL


Does the proposal involve works disturbing the sea bed of a Special Port Area (if yes, tick the box):

Harbour Master Approval for works disturbing the bed of a Special Port Area under Clause 67 of the *Management of Waters and Waterside Lands Regulations – NSW*

5. PROPONENT'S SIGNATURE (AS DETAILED IN SECTION 1)

As the proponent of the project and in signing below, I hereby:

- declare that the information contained within this application is complete and accurate at the time of signing; and
- understand that an incomplete application may be delayed or rejected and more information may be requested.

| | |
|--|------------------------------|
| Signature  | Name Mark Bellears |
| | Date 11/08/2011 |