

Application for Building Activity/Development Consent

PART ONE: APPLICANT DETAILS

APPLICANT'S NAME & CONTACT DETAILS – If no representative is nominated, AAC will use this contact only

Company Name & ABN:		
Contact Name:	Position:	
Postal Address:		
Phone (W):	Phone (Mobile):	
Fax:	Email:	

APPLICANT'S REPRESENTATIVE (IF APPOINTED) - If nominated, the AAC will direct all enquiries to this representative.

Company Name:		
Contact Name:	Position:	
Postal Address:		
Phone (W):	Phone (Mobile):	
Fax:	Email:	

TENANT'S CONSENT – The current lessee from the AAC (as per the lease for the site/building) of the land must provide their approval prior to lodging this application.

As lessee/s of the land/building to which this application relates, I/we consent to this application. I/we also give consent for authorised Airport staff or agents to enter (without prior notice) the land to carry out inspections.

Name:	Position:	
Signature:	Date:	
Name:	Position:	
Signature:	Date:	

If you are signing on behalf of the lessee as its legal representative, please state the name of your legal authority and attach documentary evidence:

(e.g. Power of Attorney, executor, trustee, company director)

Company Name & ABN ____



PART TWO: BUILDING ACTIVITY/DEVELOPMENT DETAILS

We need to correctly identify the land to be developed.	Site/Bldg No:		Lot No:		DP:	
(Please attach a site plan either from	Address:					
the lease or prepared by a registered						
surveyor)						
Description of the current use of	of the site /					
building. (What is the property used	for at present? The					
proposal must be compliant with the le						
applicant must also seek approval for c	change to the lease)					
Description of the proposed de	velopment/					
building activity (What is the devel						
numbers of persons working in the dev	velopment, etc.)					
How does the development/bu	ilding activity					
comply with the Airport Maste						
(The Applicant will need to ensure the						
complies with the Airport Master Plan, planning)	AES and future					
• • •	C(T)	<i>*</i>				
Estimated Project Value \$ (incl (Please state the project value estimate		\$				
associated building costs, provided by						
surveyor. If unsure, ask for current built						
figures)						
Estimate provided by:						
Will this be a new building?						
(If yes, please indicate m ² area)	ſ					
What is the type of	Demolition					Y or N
development/building	New Building or Str	ucture				
activity?	Alterations/additio	ns to an existing bu	ilding			
	Earthworks					
	Carpark / hardstand	ds				
	Signage					
	Change of Use					
	Remediation					_
	Other – please spec					
Will the proposed	Destruction or dam	-				
development/building	Earthworks next to					
activity involve any of the	Earthworks below t		r (where ac	cid sulfate	soils	
following?		und in Brisbane)				
		ified as contaminated?				_
(If yes to any of these items special	Removal or damage					
consideration will need to be given		se of groundwater				
to approval or management during		-				
to approval or management during construction)	Stormwater drainag	ge works				
		ge works temporary storage	e containers	S		

How many people currently use the site?	What is the proposed number of people using the site?
How many customer/visitor vehicles are expected?	How many business vehicles are used?
How many employee vehicles are expected?	
What is the maximum size/weight of vehicles using	Has provision been made for delivery/
the site?	pick-up vehicles? (Y or No)

CONTACT DETAILS FOR YOUR ARCHITECT, DESIGNER OR BUILDER

(We may need to discuss the details of the documents and will contact the organisation direct)

Company Name & ABN:		
Contact Name:	Position:	
Postal Address:		
Phone (W):	Phone (Mobile):	
Fax:	Email:	

PART THREE: AVIATION

Due to the impact of building activity/development in the vicinity of aviation facilities, all works on airport need to be reviewed for compliance.

Have you discussed the proposed works with the Operations & Technical Officer?	()Yes (()	No (

If yes, who did you speak to?

Name: Date:

What documents have they requested be provided with this application?

Have you provided aviation impact assessments?

() Yes () No

Has the proposed building activity/development been assessed for compliance with and evidence provided for the following?

	Y or N
Obstacle Limitation Surface (OLS)	
Air disturbance (including plumes)	



Is the proposed development on airside or interfacing with airside?

() Yes () No

If yes, what measures are taken to ensure airside security is maintained throughout the works to meet the standards required by the Transport Security Act 2004?

PART FOUR: ENVIRONMENT MANAGEMENT

Due to the impact on the environment, all building works on the Airport need to be reviewed for compliance.

All applications must include a completed Assessment of Environmental Effects form (Form BC-01D) available on our website at <u>www.archerfieldairport.com.au/buildingcontrol</u>

Have you completed the Assessment of Environment Effects form (Form BC-01D)? () Yes () No

Have you discussed the proposed development with the Airport Environment representative? () Yes () No

If yes, who did you speak to?

Name:	Date:	
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What documents have they requested be provided with this application?

PART FIVE: CHECKLIST & LODGEMENT

All applications must include in hard copy the following:

2 sets of all drawings (max A1 size)

2 copies of all reports & certificates

A complete list of all documents lodged including descriptions, drawing and report numbers, revision numbers and date

Any additional documents provided during the assessment of an application must be provided in hard copy x 6 Prior to approval of a Building Activity/Development Consent application, the applicant is to provide, on request, an electronic copy of the final list of documents as provided for assessment.

Have you completed the Building Activity/Development Consent Application Checklist (Form BC-01C)?

()Yes ()No



Have you discussed the proposed development with the Airport Building Controller (ABC)? () Yes () No (Discussing the application with the ABC prior to lodging the Building Activity/Development Consent will assist in determining the documentation required. Contact the ABC on (07) 3216-3040.)

If yes, who did you speak to?

Name:	Date:	

Declaration

I/We apply for consent to carry out the building activity/development described in this application.

I/We declare that all the information given is true and correct and understand that:

- If incomplete, the application may be delayed or rejected
- More information may be requested within 21 days of lodgement

I/we agree that, should the application require assessment by a specialist consultant or referral to regulatory bodies (e.g. CASA, Air Services Australia) due to the nature of the building activity/development, AAC will advise the applicant of the approximate value of the additional fees, and following written acceptance of these fees, AAC may proceed to commission these assessments. All fees for third party consultants will be at the cost +10% plus GST to the applicant and paid in advance. Failure to pay requested fees will result in delay or refusal of the application.

Company Name & ABN:		
Name:	Position:	
Signature:	Date:	

Lodgement of Application

Unless otherwise agreed, applications must be in person at Archerfield Airport Corporation Administration Office:-

Top Floor, Terminal Building Grenier Drive Archerfield QLD 4108

To make alternative arrangements, please call (07) 3275 8021.

Fees

The current AAC application fee schedule is as follows:

Archerfield	Airport Corporation
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Estimated Cost of Building Activity	AAC Application Fee (ex GST)
Under \$10,000	\$150
\$10,000 - \$100,000	\$300
Over \$100,000	\$500 + 0.1% of the balance in excess of \$100,000

Payment

Payment of fees is to be made by either of the two payment methods below.

• <u>Direct deposit</u> to the following account. (Proof of deposit must be lodged with this application)

Account Name:	Archerfield Airport Corporation						
BSB No:	034-081						
Account No:	137-089						

• <u>Credit card</u>: Please complete the details below:

CARD TYPE			VISA				MASTERCARD				AMEX				
ACCOUNT NO (BELOW)															
EXPIF	EXPIRY DATE			/		NAME ON CARD									
SIGNATURE															