

Q1	<p>Will the proposed business be carried out by a resident/occupier of the dwelling on the subject property?</p> <p><input type="checkbox"/> YES <input type="checkbox"/> NO</p> <p><i>Proposal does not comply with requirements of Home Based Business. Proceed with an application for a commercial use (5(C)). NOTE: Check your proposal with the duty planner first.</i></p> <p>Continue to Q2</p>		
DETERMINING IF IT'S A HOME OFFICE		YES	NO
Q2	Will the proposed business employ any person?	<input type="checkbox"/>	<input type="checkbox"/>
Q3	Will the proposed business occupy an area greater than 20m ² ?	<input type="checkbox"/>	<input type="checkbox"/>
Q4	Will the proposed business display any advertising signs on the premises?	<input type="checkbox"/>	<input type="checkbox"/>
Q5	Will the proposed business require any external change to the appearance of the dwelling?	<input type="checkbox"/>	<input type="checkbox"/>
Q6	Will the proposed business involve the retail sale, display or hire of goods of any nature?	<input type="checkbox"/>	<input type="checkbox"/>
Q7	Will the proposed business require essential services greater than normally required on site?	<input type="checkbox"/>	<input type="checkbox"/>
Q8	Will the proposed business entail clients or customers travelling to and from the dwelling?	<input type="checkbox"/>	<input type="checkbox"/>
Q9	Will the proposed business involve the parking of a commercial vehicle in a residential zone?	<input type="checkbox"/>	<input type="checkbox"/>
Q10	Will the business activity be conducted outside of the dwelling (i.e. in a shed or outbuilding)?	<input type="checkbox"/>	<input type="checkbox"/>
Q11	<p>Is the proposal for a 'home office'? If yes, submit this self assessment (and short description of your proposed home business activities and a floor plan highlighting the area) to the City of Bunbury for confirmation in the form of a Written Planning Advice (WPA) (fee applicable). NOTE: All answers to Q2-10 should be 'no' to be classed as a 'home office'.</p>	<input type="checkbox"/>	<input type="checkbox"/>
<p><i>If your proposal is not a home office, please complete application form 'Home Based Business' (10HBB) and answer Q12-19 and submit with all other relevant info to the City for consideration.</i></p>			
DETERMINING IF IT'S DEFINED AS 'HOME BASED BUSINESS' OR 'HOME OCCUPATION'		YES	NO
EMPLOYEES and CUSTOMERS – NOTE: any employees not a member of occupier's household = Home Based Business (up to a maximum of 2 employees)			
Q12	Will the proposed business employ any person not a member of the occupier's household?	<input type="checkbox"/>	<input type="checkbox"/>
Q13	What is the maximum number of clients per day?		
CARPARKING and VEHICLES – NOTE: vehicles over 3.5tonnes tare weight exceed the Home Based Business limit (i.e. proposal would constitute a commercial use)		YES	NO
Q14	Will the proposed business result in the requirement for more than 2 parking bays (normally required for a single dwelling) or an increase in traffic volume in the neighbourhood, involve the presence, use or calling of a vehicle more than 2 tonnes tare weight, and include provision for the fuelling, repair or maintenance of motor vehicles?	<input type="checkbox"/>	<input type="checkbox"/>
Q15	Will the proposed business result in traffic difficulties as a result of the inadequacy of parking or an increase in traffic volumes in the neighbourhood, and involve the presence, use or calling of a vehicle more than 3.5 tonnes tare weight?	<input type="checkbox"/>	<input type="checkbox"/>
Q15	Do the vehicles comply with clause 5.10.13 in TPS7? (refer to page 52)	<input type="checkbox"/>	<input type="checkbox"/>
SIZE and HOURS OF OPERATION – NOTE: over 20m ² = Home Based Business		YES	NO
Q16	Will the proposed business occupy an area within the limit of 50m ² ?	<input type="checkbox"/>	<input type="checkbox"/>
Q17	Will the business operate outside of the hours 7am – 7pm Monday – Friday?	<input type="checkbox"/>	<input type="checkbox"/>
ADVERTISING – NOTE: over 0.2m ² = Home Based Business (up to 0.5m ² permitted for HBB)		YES	NO
Q18	Will the proposed business display a sign within the limit of 0.2m ² ?	<input type="checkbox"/>	<input type="checkbox"/>
SITE AREA – ONLY COMPLETE FOR HOME BASED BUSINESS/COTTAGE INDUSTRY/FAMILY DAY CARE		YES	NO
Q19	Will the proposal comply by being conducted within a single detached dwelling on a lot with minimum area of 500m ² ?	<input type="checkbox"/>	<input type="checkbox"/>

APPLICATION NUMBER:

OWNER DETAILS

NAME:

PHONE - HOME: WORK: MOBILE:

EMAIL:

OWNER SIGNATURE 1: DATE:

OWNER SIGNATURE 2: DATE:

OWNER SIGNATURE 3: DATE:

I WOULD LIKE TO RECEIVE AN ELECTRONIC COPY OF THE DETERMINATION NOTICE VIA EMAIL: Y N

EMAIL:

NOTE: IF THE PROPERTY IS BEING MANAGED THROUGH A PROPERTY MANAGEMENT COMPANY PLEASE LIST THEIR EMAIL ADDRESS

THE SIGNATURE OF THE OWNER(S) IS REQUIRED ON ALL APPLICATIONS. THIS APPLICATION WILL NOT BE ASSESSED/APPROVED WITHOUT THE SIGNATURE.
 NB: IF THE PROPERTY IS STRATA TITLED, ALL STRATA OWNERS OR THE BODY CORPORATE WILL ALSO NEED TO SIGN THE PLANNING APPLICATION.

APPLICANT DETAILS

AS ABOVE: OR NAME:

ADDRESS:

SUBURB: POSTCODE:

PHONE - HOME: WORK: MOBILE:

EMAIL:

TO RECEIVE THE DETERMINATION NOTICE VIA EMAIL PLEASE CLEARLY NOMINATE A PREFERRED EMAIL ADDRESS

CONTACT PERSON:

APPLICANT SIGNATURE: DATE:

PROPERTY DETAILS

LOT NO: HOUSE/ STREET NO: STREET NAME:

SUBURB:

PLEASE ATTACH A COPY OF THE CERTIFICATE OF TITLE

PROPOSAL (EXISTING AND PROPOSED LAND USE/DEVELOPMENT)

DESCRIPTION OF EXISTING DEVELOPMENT (I.E. SINGLE HOUSE, GROUPED DWELLING, OTHER):

SHORT DESCRIPTION OF NATURE OF PROPOSED LAND USE AND/OR DEVELOPMENT (I.E. HOME BASED BUSINESS (COUNSELLING) ETC.):

ESTIMATED VALUE OF PROPOSAL: **NOTE: ENSURE ESTIMATED VALUE IS CORRECT AT TIME OF APPLICATION.**

GST (EXCL.): \$ GST (INCL.): \$

PRE-APPLICATION ADVICE

IF ANY ASSISTANCE/ADVICE HAS BEEN SOUGHT FROM THE CITY REGARDING THIS PROPOSAL. PLEASE COMPLETE.

OFFICER NAME

DATE OF MEETING/ADVICE

DETAILS OF PRE-APPLICATION ADVICE RECEIVED

NOTE: SHOULD THE PROPOSAL INVOLVE THE SALE OF FOOD, BEAUTY THERAPY, OR HAIRDRESSING YOU SHOULD MAKE CONTACT WITH THE CITY'S HEALTH DEPARTMENT (08) 9792 7100. THIS APPLICATION RELATES ONLY TO OBTAINING PLANNING APPROVAL.

NATURE OF THE PROPOSED BUSINESS (OR ATTACH A SHORT LETTER)

VEHICLE PARKING

PLEASE PROVIDE INFORMATION ON THE EXISTING AND PROPOSED NUMBER OF ON-SITE (AND OFF-SITE) PARKING SPACES:

TYPE OF VEHICLE	TOTAL EXISTING	TOTAL PROPOSED (INCLUDE SPACES RETAINED)	DIFFERENCE IN SPACES
CARS			
OTHER			

ALL TYPES OF DEVELOPMENT: NON-RESIDENTIAL FLOORSPACE REFER TO PAGES 8-9 OF THE HOME BASED BUSINESS LOCAL PLANNING POLICY TO MAKE SURE YOUR PROPOSAL CONFORMS

TOTAL GROSS INTERNAL FLOOR-SPACE FOR NON-RESIDENTIAL (M²)

PLEASE HIGHLIGHT THIS AREA ON THE FLOOR PLAN SUBMITTED

EMPLOYMENT REFER TO PAGES 12-13 OF THE HOME BASED BUSINESS LOCAL PLANNING POLICY TO MAKE SURE YOUR PROPOSAL CONFORMS

PLEASE COMPLETE THE FOLLOWING INFORMATION REGARDING EMPLOYEES:

	FULL TIME	PART TIME
PROPOSED EMPLOYEES		

HOURS OF OPERATING REFER TO PAGES 13-14 OF THE HOME BASED BUSINESS LOCAL PLANNING POLICY TO MAKE SURE YOUR PROPOSAL CONFORMS

PLEASE STATE THE HOURS OF OPERATION FOR HOME BASED BUSINESS ACTIVITIES:

MONDAY – FRIDAY	SATURDAY	SUNDAY AND PUBLIC HOLIDAYS

All applicants are required to verify their application against the following checklist.

Applicant <input checked="" type="checkbox"/>	Forms, Plans and Info to be provided by Applicant at the time of lodgement for Planning Approval
MANDATORY REQUIREMENTS	
ONE (1) Copy of the Following Documents	
<input type="checkbox"/>	Completed Application Form for Planning Approval (Home Based Business) – pages 1 -3 of this document. To include all owner(s) signatures.
<input type="checkbox"/>	Application Fee - (refer Planning Schedule of Fees and Charges) available at www.bunbury.wa.gov.au
<input type="checkbox"/>	Copy of Certificate of Title - Obtain via Landgate: www.landgate.wa.gov.au Click on “titles and records” icon, click on ‘certificate of title’ order now button. NOTE: This service will cost a fee.
THREE (3) Copies of the Following Documents	
<input type="checkbox"/>	Site Plan – With the following elements shown on plan <ul style="list-style-type: none"> Scale 1:200 or nearest appropriate scale INCLUDE DIMENSIONS Street name(s), lot boundaries, SETBACKS (distance of structures from boundary) Should the proposal involve a change in structures onsite: Existing and proposed buildings/ structures; indicate any to be removed as part of the proposal and proposed earthworks. Mark the plan with “PROPOSED” and “EXISTING” (make it clear what is being assessed). Car parking (for residential purposes and visitor parking)
<input type="checkbox"/>	Floor Plan (to scale – not less than 1:100) Show the room/s to be used for home based business activities by highlighting the area.
WHERE NEW STRUCTURES ARE PROPOSED, COMPLETION OF THE FOLLOWING CHECKLIST	
<input type="checkbox"/> Y <input type="checkbox"/> N	Is the lot connected to Water Corporation Sewer? Contact Water Corp on 13 13 95 to obtain information If NO, info is required on site plan regarding existing and/ or proposed on-site septic system.
<input type="checkbox"/> Y <input type="checkbox"/> N (Length) _____ (Width) _____ (Depth) _____	Is any excavation of soil proposed? If yes, what is the approximate volume (i.e. Length x Width x Depth) of the proposed excavation? Please provide measurement in metres .
<input type="checkbox"/> Y <input type="checkbox"/> N	Is any lowering of the water table proposed, whether temporary or permanent (e.g. for groundwater abstraction, dewatering, installation of new drainage, modification of existing drainage, etc.)?
IN SOME CASES WE MAY ALSO REQUIRE:	
<input type="checkbox"/>	Elevations (to scale – not less than 1:100) (IF YOU PROPOSE EXTERNAL WORKS)
<input type="checkbox"/>	Photos (i.e. to show car parking, external modifications etc.)
NOTE: SHOULD THE PROPOSAL INVOLVE THE SALE OF FOOD, BEAUTY THERAPY, OR HAIRDRESSING, YOU SHOULD MAKE CONTACT WITH THE CITY’S HEALTH DEPARTMENT (08) 9792 7100. THIS APPLICATION RELATES ONLY TO OBTAINING PLANNING APPROVAL. IT DOES NOT CONSTITUTE HEALTH OR BUILDING APPROVAL.	