



Casuarina Town Centre Concept and Project Approval

We are holding a public meeting and encourage you to participate!

Making an application to speak at our Public Meeting

The Independent Planning Commission has decided to hold a Public meeting as part of its determination of the Casuarina Town Centre Concept and Project Approval.

The meeting will be held at **Mantra on Salt Beach, The Pavilion Room, Gunnamatta Avenue Kingscliff NSW 2487** at **9:00am on Tuesday, 23 October 2018**.

If you wish to apply to speak at the public meeting, you must register your interest by completing the attached form and returning it via email to **ipcn@ipcn.nsw.gov.au** by **5:00pm on Wednesday, 17 October 2018**.

While the Commission will try to hear from as many people as possible on the day, it may not be possible for everyone who wishes to speak to have the opportunity to do so.

We may therefore use the information you provide to prioritise or group speakers by their level of interest in the project or a common issue or theme.

We may also use the information you provide to help us allocate speaking time to individuals and groups.

Don't forget that you can make a written comment to the Commission about this project by email or post. Our contact details are below:

Email: ipcn@ipcn.nsw.gov.au

**Post: Independent Planning Commission NSW
Level 3, 201 Elizabeth Street
SYDNEY NSW 2000**

All written comments will be carefully considered by the Commission as part of the decision-making process. If you intend to provide a written comment to the Commission you do **not** need to fill out this form- just send us your written comments!

We look forward to hearing from you!

Please Note: Any information given to us may be published on our website, unless explicitly stated otherwise. All personal contact details (other than names) will be removed before online publication, but may be provided to relevant government departments. Before writing to us, please read our *Privacy Statement* at www.ipcn.nsw.gov.au or call us on (02) 9383 2100.



Expression of Interest to apply to speak at the public meeting

Name: _____
Address: _____
Email: _____
Phone: _____

A. PLEASE NOMINATE YOUR INTEREST IN THE PROJECT:

A1. I have a direct interest in the proposed development: YES or NO

If your answer is "NO", please proceed to question A2.

If your answer is "YES", please answer the following:

I would like to speak at the Public Meeting as (PLEASE TICK):

- the Applicant (or a representative)
- a representative of the Department of Planning and Environment or another NSW Government Agency
- a representative of the Local Council, local councillor, State or Federal Member of Parliament
- an owner or a tenant of a neighboring property to the proposed development
- any person whose consent is required for the application to proceed
- a local resident who will be particularly affected by the proposed development

(If so, please set out the way in which you are particularly affected)

OTHER – please specify _____

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PUBLIC MEETING NOTICE

We encourage you to participate!

A2. I am not directly affected by the proposed development but have an indirect interest:

YES or NO

I would like to speak at the Public Meeting because (PLEASE TICK):

I have a family member or close friend who is directly impacted by the proposed development

I am a local resident in the same suburb or town

I have a general interest in the topic, issue and/or application

I have expertise and/or experience in a relevant field

(If so, please set out the relevant field)

I represent a peak industry body with an interest in the proposed development application

I represent a public interest group which has concerns about the proposed development application

OTHER – please specify _____

B. PLEASE NOMINATE HOW LONG YOU WOULD LIKE TO SPEAK FOR:

B1. How long do you wish to speak for? _____

(Please Note: There is no additional benefit to repeating issues already dealt with in your written comments.)

B2. If you wish to speak on behalf of an organisation, body or group, please provide the following information:

NAME OF ORGANISATION: _____

ADDRESS: _____

EMAIL: _____

PHONE: _____

(Please note the Commission reserves the right to verify the organisation body or group)

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