

Gateway
Determination
Review
Application Form

Date received:

Reference No.

#### LODGEMENT

#### Instructions to users

This form is to be completed if you wish to request an independent review related to plan-making under Part 3 of the *Environmental Planning and Assessment Act 1979*. This form relates to Gateway determination review requests.

A **Gateway determination review** can be sought following a Gateway determination where a determination is made that:

- a) the planning proposal should not proceed;
- b) the planning proposal should be resubmitted to the Gateway; or
- c) imposes requirements (other than consultation requirements) or makes variations to the proposal that the proponent or council thinks should be reconsidered.

**Note:** With reference to point 'c' above, a request to review a Gateway determination can only be made prior to the commencement of community consultation on the planning proposal.

**Note:** Gateway reviews can only be sought if the **original** Gateway determination was made by a delegate of the Minister or the Greater Sydney Commission.

Before lodging a request for review, it is recommended that you consult the Planning Circular 'Independent reviews of plan-making decisions' and 'A guide to preparing local environmental plans', which can be found on the department's website <a href="www.planning.nsw.gov.au">www.planning.nsw.gov.au</a>. The guide gives a step-by-step explanation of the review procedure and necessary requirements.

To ensure that your request for review is accepted, you must:

- · complete all relevant parts of this form
- submit all relevant information required by this form
- provide one hard copy of this form and required documentation
- provide the form and documentation in electronic format (e.g. CD-ROM)

**Note:** The department may request further information if your request for review is incomplete or inadequate.

A fee is not charged for a Gateway determination review.

All requests **must be lodged** with the department's relevant Regional Office. Please refer to <a href="https://www.planning.nsw.gov.au">www.planning.nsw.gov.au</a> for contact details.

# PART A - APPLICANT AND SITE DETAILS

above')

PARTA - APP	LICANT AND SITE DETAILS			
A1 – Applicant	Details			
Principal contact				
X Mr 🔲	Ms Mrs Dr Other			
First name		Family name		
Chris		Wilson		
Name of compan	y (N/A if an individual)			
Willowtre	ee Planning Pty Ltd c/o Ramsa	y Health Care		
Street address	Unit/street no. Street name			
	Suite 4, Level 7, 100 Walker	Street		
	Suburb/town		State	Postcode
	North Sydney		NSW	2060
Postal address	PO Box or Bag Suburb or town			
(or mark 'as	As above			

	State	Postcode	Daytime telephone Fax		Fax
Cil		****		Mahila	
Email	willouth com o	1 1		Mobile 0432 472 2	982
A2 – Site Detail	willowtp.com.a	<u>u</u>		U43Z 41Z Z	.02
Identify the land th	at is to be the sub	ject of the planning proposa	l and for wh	nich you seek a	a review
	Unit/street no.	Street name			
Street address	2	Greenwich Road			
	Suburb/town			State	Postcode
	Greenwich			NSW	2065
NAME OF THE SI	TE				
REAL PROPERTY					
<del></del>	662215 and Lot				
If you are ui and Service distinguish l	nsure of the real pr s, Land and Prope petween the lot, se	n is found on a map of the la operty description, you shou rty Information. Please ensu ction DP and strata number a comma (,) to distinguish b	ıld contact : ıre that you s. If the pro	the Departmer place a forwa posal applies t	nt of Finance rd slash (/) to o more than
PROVIDE DETAIL	S OF ALL AFFEC	TED LANDOWNERS WHE	RE THEY A	RE NOT THE	DIRECT APPLICANT
Ramsay	Health Care				
HAVE ALL OWNE	RS OF LAND TO	WHICH THIS PLANNING P	ROPOSAL	APPLIES BEE	EN NOTIFIED?
	ave but not all plicant is owner)			d owners, but r those notified:	not all, have been
CURRENT ZONIN	IG OF THE LAND	AT THE SITE			
	ercial Core				
	USE AT THE SITE				
Hospital					
		W AND THE PLANNING	PROPOS	SAL	
B1 - Reason fo	r Gateway Revie	)W			
WAS THE ORIGIN		ETERMINATION MADE BY	A DELEGA	TE OF THE M	IINISTER OR
X Yes No		s for the review of Gateway ay determination was made			
	reason for seeking umstances has occ	g a review of the Gateway d curred.	eterminatio	n. A review ca	n only proceed if one
A determination has been made that the planning proposal should not proceed					
		, will this request for review cation of the Gateway deter		ed no more tha	n 42 days from the
☐ Ye					

A determination has been made that the planning proposal should be resubmitted to the Gateway
In the case of the above, will this request for review be submitted no more than 42 days from the date of the original notification of the Gateway determination?
☐ Yes ☐ No
A determination has been made that has imposed requirements (other than consultation requirements) or makes variations to the proposal
In the case of the above, have you indicated your intent to submit a request for review no more than 14 days from the date of the original notification of the Gateway determination?
Yes This was not possible given the St Leonards Crows Nest Draft 2036 Plan was not No released within 14 days of the determination.
Will this request for review itself be submitted no more than 42 days after this date from the date of the original notification of the Gateway determination?
∑ Yes  □ No
B2 – The Planning Proposal
DEPARTMENT'S REFERENCE NUMBER:
PP_2018_LANEC_001_00
NAME OF THE LOCAL GOVERNMENT AREA
Lane Cove
DESCRIPTION OF PROPOSAL
Introduce Shop Top Housing as Additional Permitted Use and amend maximum building height
LOCAL ENVIRONMENTAL PLAN (LEP) TO BE AMENDED BY THE PLANNING PROPOSED
Lane Cove Local Environmental Plan 2009
IS THE LEP TO BE AMENDED (ABOVE) A STANDARD INSTRUMENT LEP?
INFORMATION REQUIREMENTS
Requests should be accompanied by:  - an application form  - a copy of the planning proposal as submitted to the Gateway  - a copy of all additional information and documentation provided at the Gateway  - justification for why an alteration of the Gateway determination is warranted (if applicable), including, where relevant, responses to issues raised by the original Gateway decision maker  - if relevant, disclosure of reportable political donations under section 147 of the Act.  Please refer to 'A guide to preparing local environmental plans' for the necessary information requirements.
List below all the documents, maps, plans, studies, information and any other supporting information that comprises your proposed instrument and request for pre-gateway review.

### INFORMATION PROVIDED

## - Application Form

- Cover Letter- Justification for review of Gateway Determination
- Planning Proposal (as submitted to the Gateway) including:
   Planning Proposal Report
   Urban Design Report

  - Addendum Letter- Review of St Leonards and Crows Nest Interim Statement
- Strategic and Site Specific Merit Test
   Gateway Determination Documents

## PART C - DISCLOSURE AND SIGNATURES

## C1 - Donation and Gift Disclosure

16/10/2018

Section 147 of the Environmental Planning and Assessment Act 1979 requires the public disclosure of *reportable political donations* or gifts when lodging or commenting on a *relevant planning application*. This law is designed to improve the transparency of the planning system.

DO YOU HAVE ANY DONATIONS OR GIFTS TO DISCL  ☐ Yes  ☑ No	OSE?			
How and when do you make a disclosure?				
The disclosure to the Minister or the Secretary of a <i>report</i> Act is to be made:	rable political donation or gift under section 147 of the			
<ul><li>in, or in a statement accompanying, the relevant pla submission is made, or</li></ul>	anning submission if the donation is made before the			
if the donation is made afterwards, in a statement of the person to whom the relevant planning submission was made within 7 days after the donation is made.				
What information needs to be included in a disclosure	e?			
The information requirements of a disclosure of reportable the Act. A Disclosure Statement Template which outlines Minister or to the Secretary can be found on the department of the Secretary can be found on the department.	the information requirements for disclosures to the			
C2 – Signature(s)				
By signing below, I/we hereby declare that all information the time of signing.	contained within this application form is accurate at			
Signature(s)				
Till	Alex Belcastro National Business Development Manager Ramsay Health Care, Australia			
Name(s)				
Alex Belcastro				
In what capacity are you signing				
National Business Development Manager	- Ramsay Health Care, Australia			
Date				