City of South Perth
Development Approval Conditions Clearance Request

Development Approval number	11.
Property address	
Applicant name	
Applicant address	
Applicant phone numbers	
Applicant email address	
Applicant Signature (only required if delivered as a hardcopy)	
Date of request	

Conditions matrix:

Condition No.	**Insert condition to be cleared**	**Detail the action taken to comply with the condition** *Please attach relevant supporting documents and site photos*