

Please note: an inspection will be undertaken on your property to ensure the measures you wish to put in place are suitable.

Applicant's Details						
Name						
Postal Address						
Auuress	-					
Email						
Phone	Home		Work		Mobile	
Property	Details					
Location/	Lot No.					
House No)					
Street Na	me					
Suburb	-					
Do you (olease	Reside on the property permanently; or				
tick):		☐ Part time (eg holiday house); or				
		☐ Not at all (eg vacant land).				
1. What	section of t	the Shi	ire's Bush Fire Order a	re vou	ı seeking a variation from?	
	ck all that ap			10,000	. Joeking a fantation in com-	
	rebreak widt		ion	□ F	uel loadings	
	set Protection	-		<u> </u>	uei loddings	
		•				
2 Why c	lo vou wish	to tal	ve alternative fire prot	ection	measures on your property?	
	ck all that an		re alternative inc prot	ection.	measures on your property:	
`		. ,,	ina	□ D	Provent soil eresion	
	Protection of flora/fauna					
	.iiei, piease i	Specify	•			
						_
3. What	are your in	tende	d fire protection object	ives?		
(Please ti	ck all that ap	oply)				
☐ Lif	^F e				Dwelling	
□ Pa	sture				Neighbours	
□ Ot	:her, please s	specify	:			

Shire of Capel

PO Box 369, Capel WA 6271 info@capel.wa.gov.au

(P) 9727 0222

(F) 9727 0223



4. What are your intended conservation protection objectives?							
(Pleas	e tick all that apply)						
	Prevent fire encroachment		Retain in virgin state				
	Prevent soil erosion		Ensure native fauna multiplies				
	Protect orchids, etc.						
	Other, please specify:						
5 W/h	ast alternative measures d	o you propose that will	at least afford the same level of				
5. What alternative measures do you propose that will at least afford the same level of protection to your property, and your neighbours? (please mark on site plan on attached grid)							
(Pleas	e tick all that apply)						
	Alternative firebreaks		Hazard reduction burning (please note by whom and how)				
	Use of natural features						
	Other, please specify:						
	tail the resources that you tached grid)	have available to supp	oress wild fires (please mark on site plan				
Type and location of firefighting equipment:							
Fire re	eporting procedures:						
Other,	please specify:						
	7. Have you consulted with any other agency/persons in the formulation of your Variation to the Bush Fire Order?						
	Yes	□ No	0				
	If yes, please specify:						
0 W	at anning an antal insuliant	iono io the observe week	libely to have and have will this be				
	iat environmentai implicat issed?	ions is the above work	likely to have and how will this be				
(Pleas	e tick all that apply)						
	N/A		Soil erosion				
	Dieback spread						
	Other, please specify:						



9. Will this variation to the Bush Fire Order have implications on fire protection of neighbouring properties, life or values? If so, what are these?						
☐ If yes, please specify:						
10. Is there anything else relevant to this app	lication that you wish to note?					
☐ If yes, please specify:	•					
Please use the following grid page to draw a s	site plan of your property, marking the following:					
Property boundaries	Bush areas / cleared areas					
Roads / tracks Firebreaks	Paddocks Dwellings and all other buildings (including sheds)					
Water courses / water available for firefighting	Low or reduced fuel areas					
Areas of conservational value	Any firefighting equipment on the property					
Please ensure that this application is submitted to the Shire of Capel by no later than the 31st October this year – late applications cannot be accepted.						
To be signed by applicant:						
Name (please print)						
Name (please print)						
Name (please print) Signature						
Signature Date / /20						
Signature Date / /20 FCO / Office Use Only						
Signature Date / /20 FCO / Office Use Only The above mentioned property was inspected on	/ / 2017					
Signature Date / /20 FCO / Office Use Only The above mentioned property was inspected on Inspected by (FCO):	/ / 2017 From Bush Fire Brigade					
Signature Date / /20 FCO / Office Use Only The above mentioned property was inspected on Inspected by (FCO): The alternate measures outlined above are:	From Bush Fire Brigade					
Signature Date / /20 FCO / Office Use Only The above mentioned property was inspected on Inspected by (FCO): The alternate measures outlined above are: Approved	From Bush Fire Brigade Not Approved					
Signature Date / /20 FCO / Office Use Only The above mentioned property was inspected on Inspected by (FCO): The alternate measures outlined above are: Approved It is recommended that this variation be approved	From Bush Fire Brigade Not Approved For a year period.					
Signature Date / /20 FCO / Office Use Only The above mentioned property was inspected on Inspected by (FCO): The alternate measures outlined above are: Approved	From Bush Fire Brigade Not Approved For a year period.					
Signature Date / /20 FCO / Office Use Only The above mentioned property was inspected on Inspected by (FCO): The alternate measures outlined above are: Approved It is recommended that this variation be approved	From Bush Fire Brigade Not Approved For a year period.					
Signature Date / /20 FCO / Office Use Only The above mentioned property was inspected on Inspected by (FCO): The alternate measures outlined above are: Approved It is recommended that this variation be approved	From Bush Fire Brigade Not Approved For a year period.					
Signature Date / /20 FCO / Office Use Only The above mentioned property was inspected on Inspected by (FCO): The alternate measures outlined above are: Approved It is recommended that this variation be approved	From Bush Fire Brigade Not Approved For a year period.					



Site Plan

