

VARIATION TO FIRE MANAGEMENT REQUIREMENTS APPLICATION FORM

All variations expire 30 April 2018

Applications for variations must be received by the City of Albany by 15 September in the current year. Late or incomplete applications cannot be accepted.

Your property may be inspected to ensure your proposed fire protection measures are suitable. Any of the requirements stipulated in the City of Albany's Fire Management Notice for which a variation has not been granted must be complied with.

Applicant's name: _____ Phone: _____

Postal address: _____

1. Property Details

Assessment No (if known): _____

Location/Lot No: _____ or House No: _____

Street: _____

Suburb: _____

Leased: Yes No

Property Owner's Name: _____
(If different to Applicant's name)

Do you reside on the property: (please tick)

Permanently Part time (e.g. holiday house) Vacant land

2. Variation is sought for the following fire management requirement:

- | | |
|---|---|
| <input type="checkbox"/> Firebreak location | <input type="checkbox"/> Fuel loading |
| <input type="checkbox"/> Asset protection zone | <input type="checkbox"/> Specific hazard mitigation |
| <input type="checkbox"/> Other - please specify below | |
- _____
- _____

3. Reason for variation:

- | | |
|--|---|
| <input type="checkbox"/> Rocky | <input type="checkbox"/> Steep inaccessible |
| <input type="checkbox"/> Permanently water logged | <input type="checkbox"/> Prevention of soil erosion |
| <input type="checkbox"/> Protection of flora / fauna <input type="checkbox"/> Other - please specify below | |
- _____
- _____

4. Proposed Fire Mitigation Measures

Attach a map (suitable scale) showing property boundaries, bush areas, cleared areas, paddocks, roads, tracks, firebreaks, dwellings, buildings, other value areas, water courses, type and location of firefighting equipment, water available for firefighting, low or reduced fuel areas.

What alternative measures do you propose that will afford at least the same level of protection to your property and your neighbours' (show on map wherever possible).

- Alternative firebreaks Hazard reduction burning (by whom and how)
- Use of natural features Other - please specify below

Who have you consulted in the formulation of your fire management measures?

- City of Albany
- Fire Control Officer
- Department of Fire and Emergency Services
- Department of Food and Agriculture
- Department of Parks and Wildlife
- Other - please specify

Will these fire management measures have an impact on fire protection of neighbouring properties, lives or values? If so what are these?

Print name: _____

Signature: _____ Date: ____ / ____ / ____

Office use only

Assessment No: _____

Address: _____

The abovementioned property was inspected on ___/___/___ by _____

The proposed fire mitigation measures are: Recommended Not Recommended

FCO's Comments: _____

Fire Control Officer Signature: _____

Date: ___/___/___

The proposed fire mitigation measures are: Approved Not Approved

Manager's Comments: _____

Manager Ranger & Emergency Services: _____

Date: ___/___/___