

Si	ubmission on Local Struc	cture Plan/Activity Ce	ntre Plan
Name:			
Company:			
Postal Address	:		
Phone Numbe	r:		
Email Address:			
	BMISSION (State how your into eer organisation, or as an owner		as a private citizen, on behalf
ADDRESS OF PR	OPERTY AFFECTED (If applied	cable, include lot number an	d nearest street intersection).
SUBMISSION:	☐ Support	Objection	☐ Indifferent
Provide your copages, if necessary).	omments in full and any	y arguments to suppo	ort them (attach additiona
Signature:		Date:	
Please return to:	Chief Executive Officer, City of Greater Geraldton PO Box 101, GERALDTON WA 6531		

