**Deputation Request Form**

[**Regulation**](https://www.dplh.wa.gov.au/getmedia/834d1aa3-cf7a-4186-a1b1-104b2d17eb31/DAP-Regulations) **40(3) and** [**DAP Standing Orders 2025**](https://www.dplh.wa.gov.au/getmedia/7b2de614-2f2b-41d6-aff3-f149ba8a093d/Standing-Orders-(website-published)) **cl. 3.6**

# Must be submitted at least 72 hours (3 calendar days) before the meeting

**Deputation Request Guidelines**

Before requesting to present to a DAP please review the Responsible Authority Report that has been published on the DAP website and consider whether any previous comments have been adequately addressed.

Your request will be determined by the Presiding Member based on relevance to the subject application, individual merit, other requests raising the same issues and likely contribution to the DAP’s consideration and determination of the application.

Deputations are not to exceed **3 minutes**, unless otherwise approved by the Presiding Member. The Presiding Member may agree to or require combined deputations where the deputations are considered complementary to each other and would assist the efficiency and effectiveness of the DAP meeting.

In accordance with Clause 3.6.2 of the *DAP Standing Orders*, your deputation request must be accompanied with a document setting out the deputation content.

Handouts or power points will not be accepted on the day.

In accordance with Clause 3.6.9 of the *DAP Standing Orders*, if your deputation request is not approved, the submitted content will be circulated to the DAP and published on the DAP website as a written submission.

Please complete a separate form for each presenter and submit to [daps@dplh.wa.gov.au](mailto:daps@dplh.wa.gov.au)

# Presenter Details

|  |  |
| --- | --- |
| Name | Click or tap here to enter text. |
| Company (if applicable) | Click or tap here to enter text. |
| Relationship to proposed development | Click or tap here to enter text. |
| Please identify if you have any special requirements: | **YES  NO**  If yes, please state any accessibility or special requirements:  Click or tap here to enter text. |

**Meeting Details**

|  |  |
| --- | --- |
| DAP Name | Choose an item. |
| Meeting Date | Click or tap to enter a date. |
| DAP Application Number | DAP/Click or tap here to enter text. |
| Property Location | Click or tap here to enter text. |

**Deputation Details**

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| --- | --- |
| I have read the contents of the Responsible Authority Report contained in the published DAP Meeting Agenda | **YES  NO** |
| Is your deputation in support or against the proposed development? | **SUPPORT  AGAINST** |
| Will your deputation involve a presentation that requires power-point facilities? | **YES  NO** |
| Will you be attending in person or via electronic means | **In person**  **Online** |
| I acknowledge that my deputation content will be published on the DAP website and circulated to the local government and applicant | **YES** |

**Deputation Content\***

|  |  |
| --- | --- |
| Brief sentence summarising your deputation  (To be included in the Related Information part of the agenda) | *The deputation will address:*  Click or tap here to enter text. |

# *Please provide your deputation content below or attach as a separate document. Any document must be provided in Microsoft word (.doc), PDF (.pdf), PowerPoint .pptx) or Image (.jpeg) format and be no more than 5MB.*

*If your deputation references documents that are contained within the Responsible Authority Report and/or its attachments, please consider referencing the document rather than including a duplication of documents:-*

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| Click or tap here to enter text. |