

**Standard SCC Form**

To: DPO/\_\_\_\_\_, Planning Department

**Self-certification of Compliance of Reinstatement Condition**

Lot No.:

Address:

Planning Application No.:

I (\_\_\_\_\_) am a Registered Professional Planner (RPP) (Registration No. \_\_\_\_\_) registered under the Planners Registration Ordinance (Cap. 418).

Acting on behalf of the applicant of the above planning application, I hereby confirm that the reinstatement as required under the approval of the application has been implemented satisfactorily. Photographic records showing the conditions of the whole application site taken on \_\_\_\_\_, together with a plan showing viewpoints of the photos, are attached.

Signature: \_\_\_\_\_

Name of RPP: \_\_\_\_\_

Date: \_\_\_\_\_

Tel No.: \_\_\_\_\_

Email: \_\_\_\_\_