

TEMPORARY VEHICLE CROSSING APPLICATION (SCHEDULE 6)

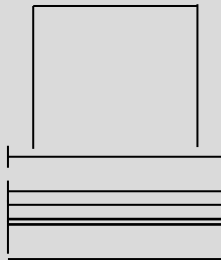
Reference No:			
Construction Site Address:			
No:		Street:	Lot No:
Name of Applicant:			
Address of Applicant:			
Phone:		Mobile:	Fax:
Email:			
<p>I hereby apply for approval to construct a temporary vehicular crossing to service the above property and agree to abide by the provisions of Local Law No. 6, Clause 8 regarding security deposit and repair of damages.</p>			
Signature of Applicant This form must be signed by the owner/occupier	I declare that all the information in this application is true and correct <input type="checkbox"/>		
	Name of applicant:		
	Signature (if not submitting electronically):		
	Date:		
Lodgement	Email: info@alpineshire.vic.gov.au Post: Alpine Shire Council, PO Box 139, Bright VIC 3741 In Person: Alpine Shire Council Office, 2 Churchill Ave, Bright VIC		
Fee	A fee is payable to process this application. More information about paying this fee will be forwarded to you by email. Refer to www.alpineshire.vic.gov.au for further details.		
Office Use	Permit number:		Permit date:
	Receipt no:		

Privacy notification

Council will ensure that any personal information provided by you is managed in accordance with the requirements of the *Privacy and Data Protection Act 2014*. If you fail to provide contact details your application will not be considered.

OFFICE USE ONLY
Existing Conditions:

Footpath:	
Kerb and Channel:	
Vehicle Crossing:	
Road Seal:	



- North
- Fall of Land

Comments

Boundary, Footpath, Kerb and Channel

Inspected by:	
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Date:	/ /	Application approved by:	
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