



Application No

Property Details

Owner's Name

Postal Address

Contact Telephone No **Fax No**

Agent Name

Postal Address

Contact Telephone No **Fax No**

Send permit to: **Owner** **Agent**

Site Location

Street/Rapid No **Road Name**.....

Town or Locality

Legal Description **Valuation No**

Contractor/Traffic Management Plan Details

Name of person/firm constructing the crossing

Name of person controlling traffic management

Postal Address

Contact Telephone No **Fax No**

A Traffic Management Plan showing how the site will be managed must be provided for approval with the application. The Application Fee of \$365.00 must be paid before it can be processed.

Crossing Required

Location

Urban

Rural

Intended Use

Residential

Commercial

Other (please specify)

Adjacent Road is:

Sealed with kerb and channel

Sealed with no kerb and channel

Metalled

Signed by Owner/Agent: **Date:**

File:

Property Description:	Please show the following: <ul style="list-style-type: none">• Roads• Property boundaries• Location of entranceway – including distances from boundaries & adjacent numbered property entrances• Other identifiable land marks, buildings etc
Road Name:	
Map Showing Location of Vehicle Crossing	

Office Use Only

Receipt No: Date: