



# Vehicle Crossing Permit Application

Application No: .....  
(Office use only)

Resource Consent No: .....  
(only required if current RC exists subject to a VC permit)

## Applicant/Owner Details

Name .....  
Postal address .....  
Contact telephone ..... Email.....

## Agent

Name .....  
Postal address .....  
Contact telephone ..... Email.....

Send permit to:  Owner  Agent as noted above

**Note:** If agent is noted, then it is the agent's responsibility to pass all Council's correspondence, notices, certificate, etc. to the applicant as appropriate.

## Site Location

Street/RAPID No ..... Road name .....  
Town or locality ..... Valuation No .....  
Legal description .....

## Contractor Details

Name of person/firm constructing the crossing .....  
Postal address .....  
Contact telephone ..... Email .....

A Corridor Access Request (CAR) with a Traffic Management Plan (TMP, prepared by a warranted Temporary Traffic Management (TTM) Planner, is required to be submitted through [www.submitica.com](http://www.submitica.com) for all work on the road corridor including vehicle crossings. Once the CAR is approved a Work Access Permit (WAP) will be issued.

## Crossing Information Required

Location: Adjacent road is:.....

- Urban (S05)  Rural (S06)  Sealed with kerb & channel  Sealed with no kerb & channel  
 Metalled (*only applicable to unsealed roads*)

## Intended Use

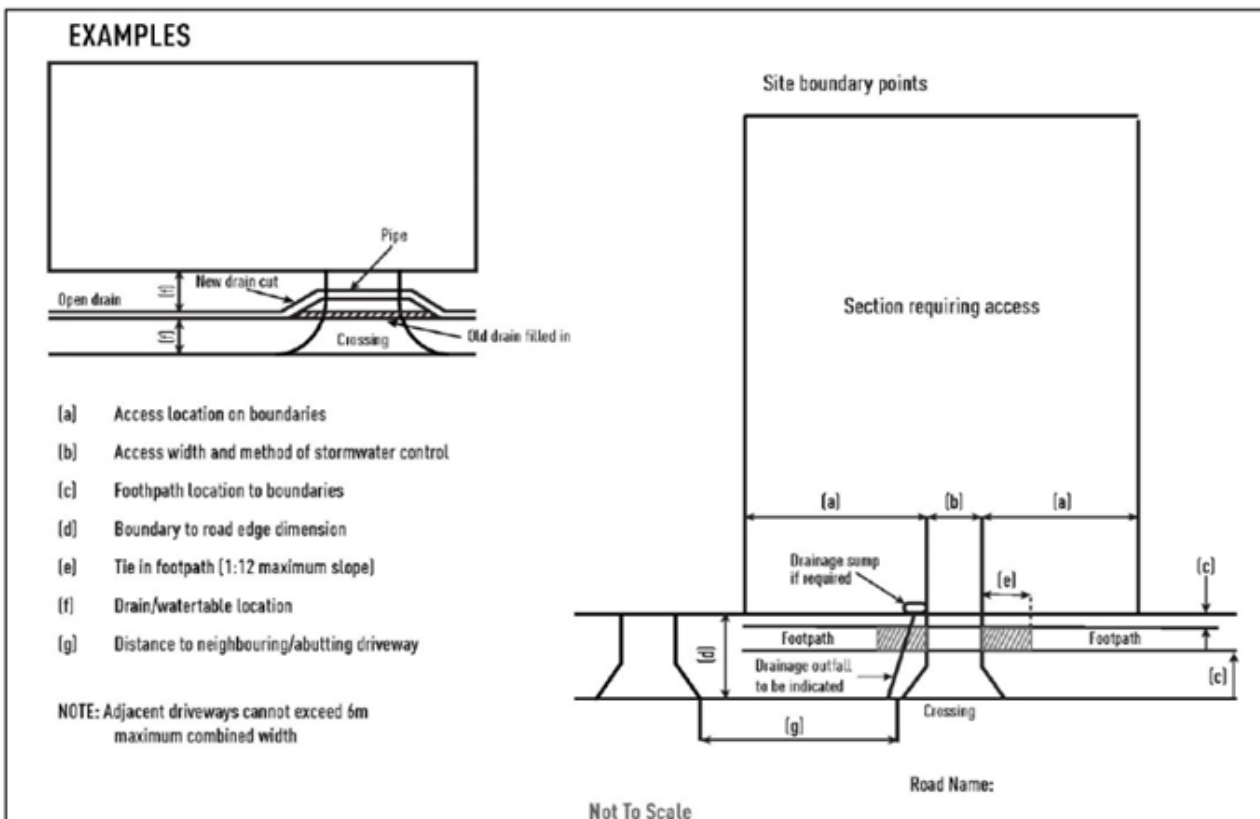
- Residential  Commercial  Other (*please specify*).....

**Note:** Application **will not** be accepted by Council if a plan is not attached for the **location** of your vehicle access.

**Site Locality Plan** (please refer to example below for required dimensions)

Road name:

Property Description:



**The application fee must be paid before the permit can be processed.**

If the property has a current resource consent of which the vehicle crossing is a part, the fee to be charged is \$125.00 (inc GST), the inspections will be billed separately. For all other applications, the fee is \$495.00 (inc GST) which includes the pre- and post-approval inspections.

For internet banking Council account number is:

- BNZ Dargaville: 02 0308 0090743 07

Alternatively, you can follow the link on Council’s website:

<https://www.kaipara.govt.nz/pay-it-online?token=MTYzNjY2NjYxOA>

Please use “VCA” and your name in the reference fields.

Signed by Owner/Agent: ..... Date: .....

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**Office Use Only**

Receipt number	Date:
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