

WORKS AND SERVICES PO BOX 210, MANDURAH WA 6210 PH: (08) 9550 3777 FAX: (08) 9550 3888 Email: council@mandurah.wa.gov.au

APPLICATION FOR BRICK PAVED CROSSOVER SUBSIDY

VEHICLE CROSSING PLACE CONTRIBUTION

I / We hereby make application for a vehicle crossing subsidy that has been constructed in accordance with Council's specification and conditions at the following property:

Lot Number: _____ Street Number: _____

Street:

Suburb: _____

I am / We are the registered owner(s) of the above mentioned lot, and hereby release the Council from liability in relation to any repairs, maintenance or other form of reinstatement to the vehicle crossing for which this subsidy is claimed.

The total cost of the vehicle crossing was \$ _____ (supporting invoice attached). The amount claimed is up to 3 metres maximum width at the rate per square metre as published by Council at the time of application.

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Property Owner(s) Name:				
Postal Address:				
Is this your permanent postal address for Rate Notices?				
Telephone Number:				
The City's preferred payment option is Bank Transfer. Please provide your bank account details below:				
Account Name:	BSB: Acc #:			
Signature:	Dat	Date:		
OFFICE USE ONLY				
Assessment Number			Account Number	
	Sundry	1	138705-5410-2150-61129	
Subsidy of \$		Signature:		
is hereby acknowledged.		Date:		
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