

# Activity Application Public Roads

Under Section 68 – Part E, Local Government Act 1993

Expiry Date: 30 June 2019

## About this form

Use this form to apply to:

- Swing or hoist goods across or over any part of a public road by means of a lift, hoist or tackle projecting over the footway.
- Expose or allow to be exposed (whether for sale or otherwise) any article in or on or so as to overhang any part of the road or outside a shop window or doorway abutting the road, or hang an article beneath an awning over the road (including display of goods on footpath/roadway).

## Documentation

You must attach all the required supporting documents.

## Lodgement & Fees

Please follow the instructions on page 2

## Any questions

Phone Customer Service on (02)9391 7000, or call in personally (see page 2)

## ▼ Applicant details

### 1. Applicant's name, address and contact details

Title:      Mr       Mrs       Miss       Ms       Other: .....

Family name (or company): .....

Given names (or ABN): .....

Postal address: .....

..... Post Code: .....

Phone (1) (....) ..... Fax (....) .....

Phone (2) (....) ..... E-mail: .....

Contact person (Only if a company etc)

## ▼ Site Details

### 2. Location of proposed Activity (Attach plan to show precise location)

.....

.....

### 3. Detailed description of proposed Activity (Attach extra material if necessary)

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.....

.....

.....

### 4. Date(s) & time(s) required for proposed Activity

Date(s) .....

Start:..... Finish: .....

### 5. Special Requirements eg: equipment

.....

.....

.....

.....

# ▼ Owner details

**6. Building Owner's name, address and contact details.**

Name of Owner: .....  
 Street No: ..... Street: .....  
 Suburb: ..... Post Code: .....  
 Phone No: .....

Being the owner of the property to which this application relates, hereby consent to the making of this application.

..... Date: .....  
 Signature of the owner of property & common seal, if a company

To be completed by Council's Cashier and Customer Service Officer. GST may be applicable (pls check receipt) <i>Retain your receipt as proof of lodgement of the application.</i>  <input checked="" type="checkbox"/> Receiving Officer: ..... Date: ..... <input checked="" type="checkbox"/> Cashier: ..... Date: .....	<b>OFFICE USE ONLY</b>		
	Fee Type	Fee	Receipt Code
	Application	\$173.00	34
Total:			

# ▼ How to lodge this application

**Address the application to:** The General Manager  
 Woollahra Municipal Council

**You can send it to us by any of the following methods**

**Post:** PO Box 61  
 Double Bay 1360  
**DX:** DX 3607 Double Bay  
**Courier or personal delivery:** Council Chambers  
 536 New South Head Road  
 Double Bay NSW 2028

**How to contact us by phone, fax or electronically**

**Phone:** (02) 9391 7000  
**Fax:** (02) 9391 7044  
**Email:** [records@woollahra.nsw.gov.au](mailto:records@woollahra.nsw.gov.au)  
**Web:** [www.woollahra.nsw.gov.au](http://www.woollahra.nsw.gov.au)  
**Who to contact:** The Officer handling your application in the Compliance section

If you wish to discuss a proposal with one of our Compliance officers, it's essential that you arrange an appointment. We recommend that you consult with a Council Compliance officer before lodging this application.  
 For any information on post-approval licence agreements for the display of goods on the footpath/roadway, please contact Council's Property Officer

**Fees**  
 The fee for this application is \$173 plus an hourly assessment rate of \$173 per hour or part of an hour. If approval is granted and a licence agreement is required to be entered into by condition of approval all legal and valuation costs will also be payable.

**Payment methods**

**In Person**  
 Payment can be made at our Customer Service Centre by the following methods: cash, EFTPOS, cheque, Money Order (make payable to Woollahra Council) or by credit card – American Express, Diners Club, MasterCard or Visa. Credit card payment will incur a processing fee.

**By Mail**  
 For credit card payments, please complete the attached "Credit Card Payment" form.  
 For cheque payments, please make payable to Woollahra Council.

**Acknowledgement**

You will receive a receipt specifying the amount of fees paid. We will acknowledge that we have received your application and provide you with the registered number of the application and the name of the officer who will be dealing with your application.

**Making a personal visit?**

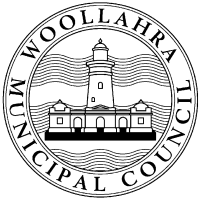
Woollahra Council is located at 536 New South Head Road, Double Bay. We look forward to seeing you.

**Bus or Rail:** Train to Edgecliff and take the bus or walk from the interchange at the Edgecliff Centre.

**Parking:** Short term customer parking spaces are available on site. On street parking in nearby streets is also available.

# ▼ Privacy notification

The personal details requested on this form are required under the *Local Government Act 1993* and will only be used in connection with the requirements of this legislation. Access to this information is restricted to Woollahra Municipal Council officers and other people authorised under the Act. Council is to be regarded as the agency that holds the information. You may make application for access or amendment to information held by Council. You may also request Council to suppress your personal information from a public register.



# Credit Card Payment Form

**All credit card payment will incur a processing fee currently 0.55%**

Payments should be sent to: Woollahra Council  
536 New South Head Road  
DOUBLE BAY NSW 2028

OR

PO Box 61  
DOUBLE BAY NSW 1360

OR

DX 3607 DOUBLE BAY

## Credit card payment

*This matter will not be processed until the credit card payment has been authorised*

Tick Applicable Credit Card	<input type="checkbox"/> AMERICAN EXPRESS	<input type="checkbox"/> DINERS CLUB	<input type="checkbox"/> MASTERCARD	<input type="checkbox"/> VISA															
Full Name on Credit Card																			
Credit Card No.				--															
Card Expiry Date			--			Total Amount Paid	\$												
Cardholder's Signature																			
Date						Contact Phone No.													

## Reason for payment

*Please indicate in this section the reason for the payment and any other applicable information.*

Payment For \_\_\_\_\_

Council Reference Eg. DA No.etc \_\_\_\_\_

Address (where applicable) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## PRIVACY NOTIFICATION

The personal details requested on this form are being collected, and will only be used for, the purpose of processing your payment. The supply of information by you is voluntary. If you cannot provide or do not wish to provide the information sought, the Council will not be able to process your payment. Access to the information is restricted to Council officers. Council is to be regarded as the agency that holds the information. You may make application for access or amendment to information held by Council.

OFFICE USE ONLY	Payment Processed	<input type="checkbox"/> Yes	<input type="checkbox"/> No
	Cashier	_____	
	Date	_____	