

FORM APPLICATION FOR ACCESS ACROSS COUNCIL LAND



Privacy Notification (Privacy and Personal Information Protection Act 1998 – Section 10) - The information that Council is collecting from you via this application may be personal information for the purposes of the Privacy and Personal Information Protection Act 1998. The intended recipients of the personal information are officers within Council. Any person may apply to inspect the application in accordance with the Government Information (Public Access) Act 2009. The supply of the information by you is voluntary and if you cannot, or do not wish to provide the information sought, Council will be unable to process your application. You may make application for access or amendment to information held by Council. You may also make a request that Council suppress your personal information from a public register. Council will consider any such application in accordance with legislation. Enquiries concerning this matter can be addressed to Council by telephoning 4227 7111.

PLEASE NOTE: REQUESTS SHOULD BE FORWARDED TO COUNCIL AT LEAST TWO WEEKS PRIOR TO COMMENCEMENT DATE

1 NAME OF PARK/RESERVE THROUGH WHICH YOU REQUIRE ACCESS

Access to commence on:

Access to conclude on:

Please note that if you require an extension on your access permission, please ring Wollongong City Council on (02) 4227 7111.


2 REASON AND/OR PURPOSE ACCESS IS REQUIRED

Is this for general access for amount to be maintenance – Bond paid is \$2345

Is this a Complying Development – please provide DA Number – Bond amount to be paid is \$5865

What type, size, tonne etc will the equipment be? Please give a detailed response which involves make and/or model

3 APPLICANT'S DETAILS

Name:	Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms <input type="checkbox"/> Miss <input type="checkbox"/>	First:	Surname:
Organisation: [if applicable]			
Address:			
Post Code:	Fax:	Email:	
Phone:	Mobile:		
Applicant's Signature:		Date:	

4 HOW TO PAY

Please return this application form together with the appropriate fees –

By Post: The General Manager
Wollongong City Council
Locked Bag 8821
Wollongong DC NSW 2500

In Person: Wollongong City Council Administration Building
41 Burelli Street
Wollongong

* Payments sent by post should be by money order or cheque made in favour of Wollongong City Council.

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FORM

Council requires a copy of the current public liability insurance policy in the amount of \$20M of the company which will be accessing the Council site to undertake work at your property

Damage/garbage bond is required to be paid, prior to approval being given for access to the site. The bond is to ensure that the Council area is left clean and undamaged during the time access has been approved. Should there be any damage to the Council area or if there is a clean up required, the damage/garbage bond is put towards these costs. Providing the area has been left clean and undamaged, arrangements will be made for reimbursement of the bond.

Please provide picture for access points along the site, including neighbouring fences and the condition of these. These photos are scanned and emailed along with this application and copies of all relevant insurance documents, noting Wollongong City Council as an interested party on the policy. Once the application form is received, it will be checked, and providing access is approved, a permit and letter will be issued to you confirming that approval has been granted for access across the Council land.

Please notify Council by telephoning 4227 7111 once work is completed and an inspection of Council land will be arranged.

Please note the bond payment, safety documentation and insurance details must be received prior to work commencing. Please return this application form to Council together with bond payment. For further information please phone Council on telephone 4227 7111.

IMPORTANT

PLEASE NOTE: It is essential that before any holes are dug, or stakes, pegs, star pickets or bollards are driven into Council grounds, that a service supply scanner is used to verify that there are no services located in the affected area.

Date Paid:	Receipt Number:	Amount: \$
Account Number: GL.10.0.9000.000000.0000.20022		

WCC STAFF USE ONLY

Item Required	Comments	Received
<i>Do works require Development Application approval?</i>	DA number:	
<i>Have you engaged a Contractor?</i> Yes No	Please provide a copy of their insurance that covers the period you require access	
<i>Public Liability Insurance</i> Yes No	Expiry date:	
<i>Vehicle Movement Plan</i> Yes No	Please attach:	

Coordinator Approval Signature		Date
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