

**PROPERTY ADDRESS FOR APPLICATION:**

<b>Property No:</b>		<b>Lot No:</b>		<b>Application No:</b>	
<b>Street:</b>				<b>Suburb:</b>	

**APPLICANT:**

<b>Name of Organisation:</b>					
<b>First Name:</b>		<b>Surname:</b>			
<b>Address:</b>					
<b>Telephone:</b>		<b>Mobile:</b>			
<b>Email Address:</b>		<b>Fax No:</b>			
<b>Contact Person</b> <small>(if different to the above)</small>					

<b>Proposed Start Date:</b>	<b>Proposed Finish Date:</b>
Provide a sketch showing the location of the proposed work zone, include the length of road and number of bays affected (if not enough space attach a separate page).	
NUMBER OF CAR PARKING BAYS ..... OR LENGTH OF VERGE REQUESTED..... (NOT TO EXCEED THE FRONTAGE OF THE CONSTRUCTION SITE)	

<b>Name:</b> (please print): _____
<b>Signature:</b> _____ <b>Date:</b> _____

<b>Lodge of application:</b> <ul style="list-style-type: none"> <li>In person, at the Customer Services, Town of Cambridge, 1 Bold Park Drive, Floreat WA 6014</li> <li>By mail, to Town of Cambridge, PO Box 15, Floreat WA 6014</li> <li>By fax or email, Fax (08) 9347 6000 or email: <a href="mailto:mail@cambridge.wa.gov.au">mail@cambridge.wa.gov.au</a></li> </ul>
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**Office Use only**

<b>Fee:</b>	\$	<b>Receipt No:</b>	
<b>Accepting Officer:</b>		<b>Date Received:</b>	