

Access Across Council Reserves APPLICATION FORM

Applicant Details

Surname:	<input type="text"/>	First Name:	<input type="text"/>
Address:	<input type="text"/>		
Suburb	<input type="text"/>	Postcode:	<input type="text"/>
Phone (h):	<input type="text"/>	Phone (w):	<input type="text"/>
Phone (m):	<input type="text"/>	Fax:	<input type="text"/>
Email:	<input type="text"/>		

Application Details:

Area you wish to access:	<input type="text"/>
Purpose for Access:	<input type="text"/>
Commencement Date:	<input type="text"/>
Completion Date:	<input type="text"/>

I agree to abide by Councils conditions of access set out below:

The area being left in a clean and tidy condition;
No damage being occasioned to any part of the subject areas;
Carry Public Liability.

Applicants Signature: _____

Date: _____

Privacy and Personal Information Protection Notice The personal information provided is collected for the purpose as stated on this document. Access is limited to Council employees and other authorised persons. Supply of the personal information is legally required and non-supply could cause delay or inability to proceed in the processing of this form. The personal information will be stored in Council's systems.

Office Use Only:

BAGS: _____

Receipt No: _____

CSO: _____

Initial Inspection Date: _____

Final Inspection Date: _____

Council Details

Address: Wagga Wagga City Council
Cnr Baylis & Morrow St Wagga Wagga, NSW 2047
P O BOX 20 WAGGA WAGGA NSW 2650

Website: www.wagga.nsw.gov.au
Email: council@wagga.nsw.gov.au
Telephone: 1300 2 92442 / 1300 2 WAGGA
Fax: _____