

PRINCIPAL OFFICE:
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 Telephone (08) 8832 0000

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DRIVEWAY CONCRETING	SF201
	Responsible Officer: Operations Manager
	Issue Date: 14.05.2014
	Next Review Date: May 2016

OWNER Details

Surname: _____

First Given Name: _____

Last Given Name: _____

Address: _____

Phone: _____

Signature: _____

Date: _____

APPLICANT Details

Surname: _____

First Given Name: _____

Last Given Name: _____

Address: _____

Phone: _____

Signature: _____

Date: _____

DRIVEWAY Details

House number: _____

Street Name: _____

Lot Number: _____

Township: _____

Please sketch in the space provided a plan of your block and where you would like your driveway concreted and the width and depth:

Please select one of the following options:

- I shall enlist a private contractor to undertake these works All works will be completed to the satisfaction of Assets & Infrastructure Services Staff; or*
- I require Council to undertake the works. Please provide me with a quotation.*

OFFICE USE ONLY

Area (m2): _____	Approval Granted: <input type="checkbox"/> yes <input type="checkbox"/> no
Debtor Account Required? <input type="checkbox"/> yes <input type="checkbox"/> no	Debtor Account Number: _____
Cost: _____	Date: _____
Approving Officer's Name: _____	Approving Officer's Signature: _____