PRINCIPAL OFFICE:

8 Elizabeth Street, Maitland Telephone (08) 8832 0000

ALL CORRESPONDENCE TO:

PO Box 57, MAITLAND, SA 5573 Fax (08) 8853 2494

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APPLICATION FOR COMMUNITY ASSET

SF211
Responsible Officer: Director Assets & Infrastructure Services
Issue Date: 14.11.2014
Next Review Date: November 2016

| APPLICANT'S DETAILS | | | | OFFICE USE ONLY | | |
|---|------------------------|---------------------|--|-----------------|---|--|
| Name | | | | Item: | | |
| Home Phone | | | | GDS: | | |
| Work Phone | | | | Distribut | tion: | |
| Mobile Phone | | | | | | |
| Email Address: | | | | | | |
| MAILING ADDRESS | | | | | | |
| PO Box/Street Addre | Box/Street Address Sul | | ourb | | Post Code | |
| | | | | | | |
| DDEEEDDED LOCATION | LEOD AS | PRET | | I | | |
| PREFERRED LOCATION FOR ASSET Description (i.e. reserve, foreshore) Nearest Street/Street Address Suburb | | | | | | |
| Description (i.e. reserve, foreshore) Nearest Street | | Street Address | Suburb | | | |
| | | | | | | |
| ASSET DETAILS | | | | | | |
| Size (including height, width, depth, weight) | | | Is any part of the asset over 10m in height? | | Is a fence higher than 2.1m required for the asset? | |
| | | | Y / N | | Y / N | |
| Detailed description of the asset and site layout (please attach plan, image/s and description on an additional | | | | | | |
| page if more space is required). | | | | | | |
| | | | | | | |
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| | | | | | | |
| ☐ Evidence of consent from public land). | om releva | ant progress asso | ciation is enclosed | d (manda | tory for all applications on | |
| As the applicant I confirm | that I wi | ll be responsible f | or all costs associ | iated with | the erection of the asset | |
| and host structure (if applicable), subject to my approval of the proof and quotation provided by Council. | | | | | | |
| | | | | | | |
| Signed Dated | | | | | | |
| Please note: all applications are subject to approval by the Director Assets & Infrastructure Services. | | | | | | |
| | | | | | | |
| OFFICE USE ONLY | | | | | | |
| Anna variable Man III Na III | | | SE UNL I | | | |
| Approved: Yes □ No□ | Date: | | Name: | | Signature: | |