Customer Contact **1300 COUNCIL (1300 268 624)** 07 4679 4000 www.wdrc.qld.gov.au info@wdrc.qld.gov.au



## 2024/25 Application for Commercial Use of Roads/Areas

this form will be used to ensure	cil is collecting personal information you supp compliance with Local Government Act 2009 information will not be given to any other pe	and maintain a re	egister of a	pprovals. Your p	ersonal informati	on will be accesse	ed by persons	who have	
Application type:	☐ New Approval		Amendment / Transfer Approval EH:						
Application for:	☐ Footpath Display	☐ Fo	☐ Footpath Dining			Retail Footpath Display - no fee			
			Stationary Vending						
Approval Duration:	Approval - \$130.00		Temporary Event (Maximum 3 days) - \$58.50 (Not for profit \$0.00)  Rate Payer \$42.00						
Applicant Det	ails								
Applicant: (must be an individual or corporation)									
Trading Name:									
Contact Person:									
Postal Address:									
Suburb:			Postco	ode:					
Phone (h):			Phone	(w):					
Phone (m):			Fax:						
Email Address:									
Activity Detail	ls								
Location:	☐ Footpath ☐ Road		☐ Park	(	Other _				
Street Address:									
Suburb:			Postcode:						
Date/s:			Time/s	s:					
Adjacent Business Consent: (sign or attach additional information)	Business Name:			Contact Ph:					
	Contact Person:			Signature:					
	Business Name:			Contact Ph:					
	Contact Person:			Signature:					
Nature of activities: Details should include type of goods and/or services, method of sale, details of waste disposal, details of signage (attach additional sheets if required)	Goods &/or Services Offered:								
	Food Provided:								
	Waste Disposal:								
	Signage (including number):								
	Other:								
			11.						

SITE PLAN					
<b></b> Attachments					
	llowing applicable to the application;				
- Adjacent permanent	t buildings sions of all structures (such as tables, signs, stand	s) to be used in conjunction	with the activity		
- Any obstructions pre	esently on the footpath (e.g. Power poles, street bit				
	djacent permanent buildings and kerbside rea proposed to be used				
Copy of Public Risk Insurance	Policy to the value of at least \$10,000,000 indemni				
	tificate for vehicle being used (if application is for Nonducted for a not-for-profit organisation (if application)		not be provided without this		
Written consent from adjacent					
Customer Signat	ture				
Signature:	Name:		Date:	1	1
Office Use Only					
Assessment number:		EH No.:			
Amount paid:		Date paid:	1	/	
Receipt number:		Initials:			