



## Application for Commercial Vehicle Parking

OWNER DETAILS	
Name:	
ABN (if applicable):	
Address:	
Postcode:	
Phone:	
Email:	
Contact person for correspondence:	
Signature:	Date:
Signature:	Date:
<p>The signature of the owner(s) is required on all applications. This application will not proceed without that signature. For the purposes of signing this application an owner includes the persons referred to in the Planning and Development (Local Planning Schemes) Regulations 2015 Schedule 2 Clause 62(2).</p>	

APPLICANT DETAILS (if different from owner)	
Name:	
Address:	
Postcode:	
Phone:	
Email:	
Contact person for correspondence:	
<p>The information and plans provided with this application may be made available by the local government for public viewing in connection with the application.</p> <p style="margin-left: 20px;">Yes</p> <p style="margin-left: 20px;">No</p>	
Signature:	Date:

PROPERTY DETAILS		
Lot No:	House/ Street No:	Location No:
Diagram or Plan No:	Certificate of Title Vol No:	Folio:
Title encumbrances (e.g. easements, restrictive covenants):		
Street name:		Suburb:
Nearest street intersection:		
Nature of any existing buildings and / or land use:		

VEHICLE DETAILS		Truck / Bus	Prime-Mover	Trailer
Details				
Year				
Make				
Model / Type				
Plate Licence No.				
Length				
Combined Length (When Attached)				
Height				
Weight	Tare			
	Aggregate			

Please attach all relevant additional documents as specified by the City's 'DA Checklist', available from the City's Administration Office, or online at [www.kalamunda.wa.gov.au](http://www.kalamunda.wa.gov.au)

OFFICE USE ONLY	
Accepting Officer Initials:	Date Received:
Local Government Reference No:	