



WORKS WITHIN MUNICIPAL ROAD RESERVES

MINOR WORKS PERMIT

CRMS	
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Use this form for : Notification of commencement of proposed works; Application for consent; and Notification of completed works to the Coordinating Road Authority.

This notification / application is provided in accordance with -

1. Road Management Act 2004, Schedule 7
2. Road Management (Works and Infrastructure) Regulations 2005
3. Code of Practice – Management of Infrastructure in Road Reserves 2008
4. Ararat Rural City Council General Local Law 90

Application Type	Note: fee only applies for <i>Application for Consent</i> . Fee is GST exclusive.	Check Box Below or Select Here
<input type="checkbox"/> Application for consent	<input type="checkbox"/> Notification of commencement	<input type="checkbox"/> Notification of completion

Applicant Details	Your Reference No.:	Select role that best describes you
Name		<input type="checkbox"/> Utility
Address		<input type="checkbox"/> Owner
Town / Locality		<input type="checkbox"/> Occupier
Contact Person		<input type="checkbox"/> Builder
Phone		<input type="checkbox"/> Other (Specify)
Mobile		<input type="checkbox"/> Contractor in behalf of
Email		Specify: Choose an item.

Details of Work			
Address of Works		Proposed Start Date	/ / 20
Town / Locality	Postcode	Proposed Finish Date	/ / 20
Additional Location Details		Actual Start Date	/ / 20
		Actual Finish Date	/ / 20
Description of Works	Check box or select	Choose an item.	Speed Limit km/h
		<input type="checkbox"/> Service Connection	
		<input type="checkbox"/> Drainage Connection	
		<input type="checkbox"/> Vehicle Crossing	
		<input type="checkbox"/> Other Works (describe)	

Provide a site plan showing the location and extent of proposed works, the location and all assets within the vicinity.

Works Manager* Details (the person or body who is responsible for conducting these works)			
Name		ABN	
Address		Phone	
Town / Locality	Postcode	Mobile	
Contact Person		Email	
Does the Works Manager hold Public Liability Insurance		<input type="checkbox"/> Yes <input type="checkbox"/> No	Specify:
Name of Public Liability Insurance Company:			
Policy Number:	Expiry Date	Amount of Cover	\$

THIS SECTION TO BE COMPLETED BY THE RECEIPTING AND PERMIT ISSUING OFFICERS			
Permit Number		Receipt Number:	
Permit Issue Date		Receipt Date	
Permit Valid Until		Permit Fee (exGST)	\$
Signature of Issuing Officer		Signature of Receiving Officer	

This permit grants consent to the applicant to undertake the works, at the location, and by the Works Manager identified above, in accordance with the *Standard Conditions of Consent*, any *Special Conditions of Consent* and any other Council By-Law or Regulation in force at the time.

This permit, or a copy of this permit, may be used to notify Council of changes to commencement and completion date where these vary from the proposed dates identified above.