



WAIMATE DISTRICT COUNCIL

ROAD TECHNICAL UNIT

APPLICATION FOR CONSENT TO INSTALL VEHICLE ACCESS

To
Roading Manager
Waimate District Council
P O Box 122
WAIMATE

Application Fees Apply
Website -Fees and Charges
To be paid at time of application

DETAILS OF APPLICANT

Applicants Name _____
Owners Name (If different from applicant) _____
Postal Address _____

Telephone No _____ Mobile _____ Email _____

LOCATION

Road Name _____
Rapid No _____ or Street No _____
Please Attach Plan detailing rural location

TYPE OF VEHICLE ACCESS

Urban Residential with Kerb & Channel	<input type="checkbox"/>	Sealed Road	<input type="checkbox"/>
Urban Residential no Kerb & Channel	<input type="checkbox"/>	Metal Road	<input type="checkbox"/>
Rural Residential	<input type="checkbox"/>		
Paddock Access	<input type="checkbox"/>		
Rural Heavy Traffic	<input type="checkbox"/>		

VEHICLE ACCESS SIGHT DISTANCE (Rural)

Speed limit	_____	km/hr
Operating Speed	_____	km/hr
Sight Distance Required	_____	metres

CULVERT DETAILS (Rural)

Diameter	_____ mm	Material	_____
Length	_____ m		

SIGNATURE OF APPLICANT

DATE

Office use

Application Received _____

Site inspection _____

Letter issued _____

July 2017