



WAIMATE DISTRICT COUNCIL

ROAD TECHNICAL UNIT

APPLICATION FOR KERB CROSSING

To
Roading Manager
Waimate District Council
P O Box 122
WAIMATE

Application Fees Apply
Website under 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 Private _____ Work _____ FAX _____

DETAILS OF PROPERTY REQUIRING SERVICE

Property Address _____

DETAILS OF KERB CROSSING

Type _____
Length _____ metres
Cost _____

DETAILS OF ENTRANCE SEALING

Area _____ m²
Cost _____

SIGNATURE OF APPLICANT _____

DATE _____

Office use

Approved _____

Work Order _____

Invoice _____