

APPLICATION FOR VEHICLE CROSSOVER

APPLICANT'S NAME			
APPLICANT'S ADDRESS			
SUBURB / TOWN		FAX	
TELEPHONE	MOBILE		
CONTRACTOR DETAILS			
NAME			
ADDRESS: STREET			
SUBURB / TOWN			
OWNER'S NAME			
LOCATION OF X/OVER			
SUBURB / TOWN			
TELEPHONE	MOBILE	FAX	
INSURANCE DETAILS			
INSURANCE COMPANY			
CERTIFICATE OF CURRENCY	COPY ATTACHED	YES	NO

SKETCH OF LOCATION AND PROPOSAL

*PLEASE ATTACH SEPARATE PLANS AND DETAILS
(see back of this form)*

CALL '1100' DIAL BEFORE YOU DIG FOR LOCATION DETAILS

To obtain the subsidy, construction must be in accordance with Council's Vehicle Crossover Specification, a Council representative must inspect and approve the crossover prior to any concrete being poured.

Phone 9186 8555 and ask for Operations Department to organize an inspection,
24 hours' notice required –

REMEMBER – NO INSPECTION, NO SUBSIDY

Office Use Only:

Public Liability Insurance:

Traffic Management Accreditation:

Location:

Approved / Not Approved

Applicant Advised:

Date: _____

Signature _____

Privacy Consent and Disclosure Form

The City of Karratha collects personal and property-related information on this form. This collection is managed in accordance with the *Privacy and Responsible Information Sharing Act 2024* and the City's Privacy Statement.

Your information may be disclosed to City staff, contractors, consultants, utility providers, government agencies, emergency services, and law enforcement where required. This information is subject to the *Local Government Act 1995 (WA)*, relevant regulations, and the *Freedom of Information Act 1992*.

By completing this form, you are acknowledging that the City will use your information provided. You can request access to, or correction of, your personal information by emailing enquiries@karratha.wa.gov.au, or writing to PO Box 219, Karratha WA 6714.

For more information about our privacy practices, please refer to the City's [Privacy Policy](#) and [Privacy Statement](#).