

# McKinlay Shire Council

29 Burke Street, Julia Creek  
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Local Government  
Act 2009

## Mechanical Saw or Welding Plant

### Application for Permit to Use Mechanical Saw / Welding

Contact Council if you have any specific enquiries regarding fees or how to complete this form. Type or print clearly and select boxes where applicable. Enter "n/a" if the question does not apply.

#### Application is for

Mechanical Saw Permit

Fee \$ \_\_\_\_\_

Welding Plant Permit

Fee \$ \_\_\_\_\_

If applicant is a company,  
insert company name and  
ACN / ARBN.

#### Applicant/s details

Company name \_\_\_\_\_ ACN / ARBN \_\_\_\_\_

Title  (eg. Mr, Mrs, Miss etc.)

Family name \_\_\_\_\_

Given names \_\_\_\_\_

Position \_\_\_\_\_

I declare the information provided in this application to be true and correct.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Title  (eg. Mr, Mrs, Miss etc.)

Family name \_\_\_\_\_

Given names \_\_\_\_\_

Position \_\_\_\_\_

I declare the information provided in this application to be true and correct.

Signature \_\_\_\_\_ Date \_\_\_\_\_

#### Contact details

Select as applicable.

Business

Private

Contact person \_\_\_\_\_

Postal address \_\_\_\_\_

Locality / Suburb \_\_\_\_\_ State \_\_\_\_\_ Postcode \_\_\_\_\_

Contact ph. \_\_\_\_\_ Mobile \_\_\_\_\_

Contact fax \_\_\_\_\_ Email \_\_\_\_\_

<p><b>Business name must be registered with Fair Trading.</b></p> <p><b>Enter postal address if different from street address.</b></p> <p><b>Real property description - refer to Rates Notice.</b></p>	<b>Business details</b>		
	Business name		BN
	Street address		
	Locality / Suburb		State
	Postcode		
	Postal address		
	Locality / Suburb		State
	Postcode		
	Contact ph.	Mobile	
	Contact fax	Email	
Lot no.		Reg. plan no.	Parish

<p><b>E.g. mechanical saw / welding plant.</b></p>	<b>Machinery details</b>		
	Address where machinery is to be used		
	Locality / Suburb		State
	Postcode		
	Description of machinery to be used		
	Intended purpose for use of equipment		
	When will the mechanical saw / welding plant be operated?		
	Days of operation	Hours of operation	
	Monday	<input type="checkbox"/> am <input type="checkbox"/> pm	to <input type="checkbox"/> am <input type="checkbox"/> pm
	Tuesday	<input type="checkbox"/> am <input type="checkbox"/> pm	to <input type="checkbox"/> am <input type="checkbox"/> pm
Wednesday	<input type="checkbox"/> am <input type="checkbox"/> pm	to <input type="checkbox"/> am <input type="checkbox"/> pm	
Thursday	<input type="checkbox"/> am <input type="checkbox"/> pm	to <input type="checkbox"/> am <input type="checkbox"/> pm	
Friday	<input type="checkbox"/> am <input type="checkbox"/> pm	to <input type="checkbox"/> am <input type="checkbox"/> pm	
Saturday	<input type="checkbox"/> am <input type="checkbox"/> pm	to <input type="checkbox"/> am <input type="checkbox"/> pm	
Sunday	<input type="checkbox"/> am <input type="checkbox"/> pm	to <input type="checkbox"/> am <input type="checkbox"/> pm	

<p><b>Lodgement</b></p> <p>Provide a completed application form, supporting documentation (if required) and appropriate fee to Council - see address at the beginning of the form.</p> <p><b>Please note: This application and fee MUST be lodged with your Council</b></p>
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<p><b>Privacy Statement</b></p> <p>The Council is collecting your personal information in accordance with current legislation to process your application. The information will only be accessed by authorised council employees. Your personal details will not be disclosed to a third party outside the process of dealing with your application, except where required by legislation (including the <i>Right to Information Act 2009</i>) or as required by Queensland State Government.</p>
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<b>Office use only</b>			
Application fee		Reg. no.	
Receipt code		ID no.	
Authorised officer		Inspection date	/ /
Recommendation			
		Rec. no.	
Date	/ /	Account property no.	