

Barcoo Shire Council

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Local Government
Act 1993

Local Law
(Commercial Use of
Roads)

Footpath Usage or Obstruction

Application for Permit to Use Footpath

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

Footpath Usage or Obstruction Permit Fee _____

Applicant/s details

Title Mr Mrs Ms Miss Other (specify)

Family name

Given names

Position

I hereby indemnify the Council against all claims made in relation to actions in using the footpath, and I have a policy of public liability for which details are provided.

Signature _____ Date / /

Title Mr Mrs Ms Miss Other (specify)

Family name

Given names

Position

I hereby indemnify the Council against all claims made in relation to actions in using the footpath, and I have a policy of public liability for which details are provided.

Signature _____ Date / /

Select as applicable.

Contact details

Business Private

Contact person

Postal address

Locality / Suburb

State

Postcode

Contact ph.

Mobile

Contact fax

Email _____

Business name must be registered with the Dept of Justice and Attorney-General.
If applicant is a company, insert company name and ACN / ARBN.

Business details

Business name _____ BN

Company name _____ ACN / ARBN

Street address

Locality / Suburb

State

Postcode

Enter postal address if different from street address.	Postal address		
	Locality / Suburb	State <input style="width:20px; height:20px; border: 1px solid black;" type="text"/> <input style="width:20px; height:20px; border: 1px solid black;" type="text"/> <input style="width:20px; height:20px; border: 1px solid black;" type="text"/>	Postcode <input style="width:20px; height:20px; border: 1px solid black;" type="text"/> <input style="width:20px; height:20px; border: 1px solid black;" type="text"/> <input style="width:20px; height:20px; border: 1px solid black;" type="text"/> <input style="width:20px; height:20px; border: 1px solid black;" type="text"/>
	Contact ph. <input style="width:20px; height:20px; border: 1px solid black;" type="text"/> <input style="width:20px; height:20px; border: 1px solid black;" type="text"/> <input style="width:20px; height:20px; border: 1px solid black;" type="text"/> <input style="width:20px; height:20px; border: 1px solid black;" type="text"/> <input style="width:20px; height:20px; border: 1px solid black;" type="text"/> <input style="width:20px; height:20px; border: 1px solid black;" type="text"/>	Mobile <input style="width:20px; height:20px; border: 1px solid black;" type="text"/> <input style="width:20px; height:20px; border: 1px solid black;" type="text"/> <input style="width:20px; height:20px; border: 1px solid black;" type="text"/> <input style="width:20px; height:20px; border: 1px solid black;" type="text"/> <input style="width:20px; height:20px; border: 1px solid black;" type="text"/> <input style="width:20px; height:20px; border: 1px solid black;" type="text"/>	
Contact fax <input style="width:20px; height:20px; border: 1px solid black;" type="text"/> <input style="width:20px; height:20px; border: 1px solid black;" type="text"/> <input style="width:20px; height:20px; border: 1px solid black;" type="text"/> <input style="width:20px; height:20px; border: 1px solid black;" type="text"/> <input style="width:20px; height:20px; border: 1px solid black;" type="text"/>	Email _____		
Real property description – refer to Rates Notice. Select as applicable. E.g. displaying stock, placing structures or material on footpath, fundraising, obstruction of footpath whilst undertaking works. If a retail stall / fundraising, please advise products for sale.	Lot no.	Reg. plan no.	Parish
	Status of applicant/s <input type="checkbox"/> Owner of premises <input type="checkbox"/> Occupier of premises		
	Proposed use of footpath		
Hours of operation From _____ <input type="checkbox"/> am <input type="checkbox"/> pm To _____ <input type="checkbox"/> am <input type="checkbox"/> pm			
Is a car park space required?			
<input type="checkbox"/> No <input type="checkbox"/> Yes Registration no. of vehicle _____			

A copy of a Public Liability Insurance Policy, to the minimum \$ value required by Council, must accompany applications. The policy shall name the insured as 'the applicant for the Permit and the Council'.	Public liability insurance		
	Name of insurance company		
	Name of insured		
	Policy no.	Amount of cover \$	
Policy expiry date <input style="width:20px; height:20px; border: 1px solid black;" type="text"/> <input style="width:20px; height:20px; border: 1px solid black;" type="text"/> / <input style="width:20px; height:20px; border: 1px solid black;" type="text"/> <input style="width:20px; height:20px; border: 1px solid black;" type="text"/> / <input style="width:20px; height:20px; border: 1px solid black;" type="text"/> <input style="width:20px; height:20px; border: 1px solid black;" type="text"/>			

Lodgement Please attach the following: 1. A site plan (see diagram) that clearly identifies the following: <ul style="list-style-type: none"> • the width of the footpath outside your business; • the type of obstructions that are presently on the footpath outside your business (power pole, street bin, parking meter, etc.); • the preferred location of each item for which a permit is sought: <ul style="list-style-type: none"> • Display table.....m² each; • Display stand.....m² each; and • the clearance distance to the kerb and shop frontage etc. when items are placed in your preferred locations. 	ROAD		
	KERB		
	FOOTPATH ↙		FOOTPATH ↘
	YOUR BUSINESS PREMISES		

2. A copy of your Public Liability Insurance Policy to the minimum \$ value required by Council. The public liability must indemnify the Council, in the prescribed form and manner, against all public liability claims arising from the operation of this business.

Please note: This application and fee MUST be lodged with your Council.

Office use only

Application fee		Reg. no.	
Receipt code		ID no.	
Authorised officer		Inspection date	
Recommendation			
			Rec. no.
Date	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Account property no.	