Office Use Only:			
Receipt Number:	Date Paid:	/	Cardinia

## **Shipping Container Permit Application – Public Land**

Community Local Law 2024

IMPORTANT: Please note that proof of Public Liability Insurance must be submitted with every application.

Applicant Details (Please Business Name:	•						
Postal Address:							
Mobile:		Phone:					
Email Address (Permit wil	l be sent here):						
Location Address: Street Number:	Property Street Name: _						
Suburb:		Postcode:					
Space to Occupy Refuse I	Facility:						
□ Road □ Fo	otpath 🗆 Nature	Strip					
Container Details:							
Maximum permit term of 12 months can be issued.							
Commencement Date:	/	Completion Date:/					
Dimensions: Height:	Length:	Width:					
Purpose of application for	shipping container:						
	-	_					

Fee: \$200.00 (no GST).

A Customer Service Officer from Council will contact you via phone to arrange payment.

The fee is an application fee and will not be refundable if the application is not approved.

Submitting your Permit Application:						
Supp	porting Documentation: (Please ensure the following ar	e attached to the Applic	ation)			
□ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	For placement on residential (private) land: Shipping (private) property and not obstructing footpath, natural A Certificate of Currency of Public Liability (minimum A location sketch and photo must be provided showing the fee is an application fee and will not be refundable laimer:	re strip and/or public la coverage \$20 million) r ng where container will	nd. nust be pr be stored	ovided. on the property.		
to	nereby undertake to comply with requirements of C public safety and amenity in public places and an uthorised Officer of Council.					
Sig	gnature:	Date:	/			