

Office Use Only:

Receipt Number: _____

Date Paid: ____/____/____



Cardinia

Heavy Vehicle Storage Application Form

Community Local Law 2024

IMPORTANT: *Please note that the vehicle must be stored entirely on the property, not obstructing any footpath, nature strip or public land.*

Applicant Details (Please Print):

Name: _____

Postal Address: _____

Mobile: _____ Alternate Phone: _____

Email Address: _____

Location of Storage Address:

Street Number: _____ Street Name: _____

Suburb: _____ Postcode: _____

Vehicle Details:

Make/Model: _____ Registration Number: _____

Tare: _____ GVM: _____

Requested Days and Times for Permit:

Days: (please circle) MON TUES WED THURS FRI SAT SUN

Times: _____ am - _____ pm

Payment Options:

☐ Cheque or Money

Cheques or money orders should be made payable to Cardinia Shire Council.

☐ Credit Card

To pay by credit card please tick the box and a Customer Service officer will phone you for your details.

Submitting your Permit Application:

Supporting Documentation: (Please ensure the following is attached to the Application)

☐ Sketch or photo of requested location

Disclaimer:

I hereby undertake to comply with requirements of Cardinia Shire Council's Local Laws in relation to this permit application and any special conditions as required by an Authorised Officer of Council.

Signature: _____

Date: ____/____/____