



APPLICATION FOR CONSTRUCTING – Vehicle Crossing

(To be submitted for approval at least 4 weeks prior to construction of the crossing)

Name: _____

Property Address
for crossing: _____

Postal Address: _____

Daytime phone no: _____

Email: _____

Crossing Details		Construction Material	
New Crossing?		Asphalt (Commercial & Industrial only)	
Upgrade Existing Crossing?		Bitumen (Rural only)	
Additional Crossing?		Brick Paving (Residential & Rural only)	
Is There a Pathway?		Concrete (Commercial, Industrial, Residential & Rural)	
Site Plan / Sketch Attached?		Proposed Crossing Width (at Property Boundary)?	

I seek approval for a crossing to be installed to the specifications of the City of Gosnells at the property address listed above.

The expected commencement date for construction is _____

Written approvals have been obtained for relocation or alteration to the following facilities/services:

Signature

Date

Office Use Only

Property ID No: _____

Application approved/not approved _____

Comments: _____

Officer: _____

Signature: _____

Date: _____