

## **Application for a General Permit**

Section 1: APPLICANT	DETAILS			
Name:				
Books I wilder				
Postal address:	Town:			Postcode:
Telephone No.	(H)	(W)	(M)	
Email address:			<u> </u>	
Section 2: ACTIVITY D	ETAILS			
Activity location:				
Description of activity:				
Date(s) and time(s) of activity:				
Section 3: CHECKLIST	(if applicable)			
□ Site map	map 🗆 Public Liability insurance			
Section 4: DECLARATI	<b>ON</b> This form must b	e signed.		
I declare that I am the applicant and all information given is true and correct.		Applicant signature:		Date:
PLEASE FORWARD THI	S APPLICATION T	О		
·	e.admin@bawbaw Service Centre: 33 Y	PO Bo	ipliance Departi ox 304 agul VIC 3820	ment, Baw Baw Shire Council
OFFICE USE ONLY				
Foo	Date received	Pacaived by		Permit number

Fee		Date received	Received by	Permit number
Application	\$50.00			
Permit	\$100.00			

Baw Baw T +61 3 5624 2411 Shire Council F +61 3 5622 3654 E bawbaw@bawbawshire.vic.gov.auW bawbawshire.vic.gov.au

PO Box 304 Warragul Victoria 3820

IMPORTANT INFORMATION
Your application will be processed within 10 business days of receipt. If you have any questions, or require assistance completing this form, please contact Community Compliance on 5624 2411.
PRIVACY STATEMENT
The personal information requested on this form is being collected to enable Council to consider the permit application. Council will use this information for this purpose, or one closely related, and may disclose this informatio
by law in accordance with the <i>Privacy and Data Protection Act 2014</i> . The applicant may apply to Council for access and/or amendment of the information by contacting Council's freedom of information/privacy officer on 5424 2411.