

APPLICATION FOR CROSSOVER CONTRIBUTION

FOR COMPLETED CROSSOVERS ONLY

(REFER TO NEXT PAGE FOR INSTRUCTIONS)



CROSSOVER LOCATION

I/We hereby make an application for a contribution towards the crossover constructed at the following property:	
Property Street Number:	
Property Address:	
Property ID (refer to rates notice)	
<input type="checkbox"/> Tick to confirm the Crossover is constructed and ready for inspection	

APPLICANT DETAILS

Name (Owner(s) of property): (both/all property owners)			
Residential address: (if different to property address above)	Address:		
	Suburb:	Postcode:	
Postal address: (if different to property address above)	Address:		
	Suburb:	Postcode:	
Email address:			
Telephone number(s):			
<input type="checkbox"/> Tick for change of residential address <input type="checkbox"/> Tick for change of postal address			

BANK DETAILS

Bank Name:	Account Name:	BSB:	Account Number:

CROSSOVER CONSTRUCTION DETAILS (IF APPLICABLE)

If Pavers less than 60mm in thickness are used, the following information is to be provided:	
Paver Manufacturer:	Name of Paver:

BUSINESS DETAILS (FOR GST PURPOSES, IF APPLICABLE)

Was the crossover constructed for and in the course of running a business: <input type="checkbox"/> Yes <input type="checkbox"/> No	If No – Proceed to Signatures If Yes – Is the business registered for GST? <input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes*, insert ABN (Australian Business Number):	

*The City's Finance Compliance Officer will be in touch to discuss Recipient Created Tax Invoice Agreement.

I/We give permission for the City of Busselton to use information in this form to change the address/name details on all City managed systems.

I/We declare that the information provided in this application is true and complete.

This form must be signed by the property owner. If the property is owned jointly, **both/all property owners must sign**. If signed by a power of attorney, a copy of the power of attorney must be provided. If executed by a company, the form must be executed in accordance with the Company's constitution and the *Corporations Act 2001* (Cth).

APPLICANT SIGNATURES (REQUIRED TO PROCESS)

Owner / Sole Director / Secretary Signature:	Date:
Owner / Sole Director / Secretary Signature:	Date:

All Communications to:

T (08) 9781 0444
E city@busselton.wa.gov.au

Locked Bag 1 Busselton WA 6280
www.busselton.wa.gov.au

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and opportunity meet!*

INSTRUCTIONS:

1. Complete and submit this form to request an assessment of your constructed crossover.
2. The application must be for a crossover that is **constructed** and **completed** only.
3. If the property is owned jointly, **both/all property owners must sign**. If signed by a power of attorney, a copy of the power of attorney must be provided. If executed by a company, the form must be executed in accordance with the Company's constitution and the *Corporations Act 2001* (Cth).
4. Forward the completed form to the City of Busselton using one of the following options:
 - a. Email – city@busselton.wa.gov.au
 - b. Post – City of Busselton, Locked Bag 1, Busselton WA 6280
 - c. Hand delivery – City Administration Offices, 2 Southern Drive, Busselton

PLEASE NOTE:

- Receipts for crossover construction may be required.
- Applicants will not receive the Council's crossover refund when the crossover does not meet the "minimum crossover dimensions" as below.
- Engineering and Works Services Standards and Specifications can be found on the City's website: www.busselton.wa.gov.au/plan-and-build/engineering-technical-standards-and-specifications.aspx

MINIMUM CROSSOVER DIMENSIONS

