

Crossover Subsidy Application Form



November 2018

Infrastructure Services
PTY/

Crossover Subsidy Application Form

Applicant		
Name		
Postal Address		
Street Address		
Phone	(bh)	(mob)
Email		

Eligibility

- Crossovers must be constructed in accordance with the Shire's Standards Requirements for Crossovers and detail drawings for Urban and Rural Residential Crossovers.
- The Shire's crossover subsidy is payable only to the property owner and a subsidy applied for within 6 months of completion of the residence.
- Crossover subsidy payments are only payable if a crossover is constructed with a sealed pavement surface and dimensions as specified in the Shire's Standard Requirements for Crossovers and detail drawings for Urban and Rural Residential Crossovers.
- The Shire subsidy is payable for sealed crossovers fronting sealed roads providing all other aspects of the requirements are adhered to.
- There is no subsidy applicable to additional crossovers on the one rateable property.

A copy of the Shire's Standards Requirements for Crossovers can be obtained by request please email amrshire@amrshire.wa.gov.au for the attention of Infrastructure Services. Alternatively from our website at www.amrshire.wa.gov.au or collected from the main counter at the Civic Administration Office, Wallcliffe Road, Margaret River or Augusta Shire Office, Allnut Terrace, Augusta.

Please complete the details on both sides of the form, sign and return your application to Shire of Augusta Margaret River's Infrastructure Services at PO Box 61, Margaret River 6285 or email to amrshire@amrshire.wa.gov.au.

CROSSOVER SUBSIDY APPLICATION FORM

I/We hereby make application for a council subsidy towards the crossover constructed to Shire Specifications at the following property:

House /Lot Number _____ Street/Road _____

Town _____

MATERIAL USED (PLEASE CIRCLE)

- Sprayed Bitumen
- Bituminous Concrete (Hotmix/Asphalt)
- Insitu concrete
- Paving Bricks/Blocks

Your subsidy will be paid by EFT - please complete bank account details below.

BSB	ACCOUNT	Account NAME

SIGNATURE _____ DATE: _____

Office Use Only:	
Inspected	
Signature	
Date approved	
APPROVED	Yes <input type="checkbox"/> No <input type="checkbox"/>