Construction of Vehicle Crossing by a Council Authorised Contractor Application Form



APPLICATION FOR CONSTRUCTION OF VEHICLE CROSSING BY COUNCIL AUTHORISED CONTRACTOR

Details of Owner/Applicant

Details of Vehicle Crossing Site

Name of Owner/ Applicant		Street Address	
Mailing Address		Town	
		Lot DP No.	
Phone	Fax	Construction Type Drawing No. ✓ <i>tick applicable</i> 3000-2-A 3000-3-A	ie 3000-4-A
Email		600-211D 3000-6-A	3000-7-A

Name of Approved Contractor constructing the vehicle crossing:

Refer to list of Council approved vehicle crossing contractors on the TCDC website: www.tcdc.govt.nz/Our-Services/Transport-Roads-and-Road-Safety

Information Checklist

Please supply the following relevant information with your application

Sketch Plan (complete the vehicle crossing sketch plan on the reverse of this form)

Applicant/Audit Fee Paid: (\$150.00 incl. GST - covers completion inspection) Should an additional inspection be required a further fee of \$95.00 will be incurred.

THIS APPLICATION IS VALID FOR 12 MONTHS FOLLOWING DATE OF RECEIPT.

- // Please complete both sides of this form and return with payment to your local TCDC service centre.
- Pinnacles Civil Inspection Form must be forwarded to Pinnacles Civil once crossing has been completed.

Office use only. Please forward to Roading Manager.

Valid for 12 months

RECEIPT CODE	RECEIPT MANAGER	DATE & TIME RECEIVED
INSPECTION APPROVED BY		DATE APPROVED

Vehicle Crossing Sketch Plan

