

# Application for Residential Crossover Subsidy



The City provides a crossover subsidy contribution in accordance with the *Local Government (Uniform Local Provisions) Regulations 1996 s15*. The City reserves the right to refuse a subsidy payment and order the alteration or removal of any constructed crossover which does not conform to the City's Residential Crossover Specifications or creates a hazard.

Please allow 6 weeks for an Application to be inspected, reviewed and processed.

## The Chief Executive Officer

City of Rockingham  
PO Box 2142  
ROCKINGHAM WA 6168

I / we, \_\_\_\_\_ (Printed Name)

the undersigned owner, make an application for a City contribution towards the crossover at

Lot No. \_\_\_\_\_ Street No. \_\_\_\_\_ Suburb \_\_\_\_\_

Street Name \_\_\_\_\_

and hereby release the City from liability in relation to any future maintenance and repair or other forms of reinstatement in relation to this crossover.

If the above is not your permanent address for postal correspondence please provide below:

Postal Address \_\_\_\_\_

I confirm that:

- The crossover is constructed to the City's specifications / as per an approval issued by the City;
- I am the owner of the property Lot adjoining the crossover;
- A crossover subsidy has not been claimed and paid for this property Lot previously;
- I understand the subsidy amount will be determined by the City; and
- I have attached suitable evidence to support my application, being a builders' completion letter or receipt, or contractor delivery/supply docket stating strength, quantity and form of material.

Please provide your nominated bank details for an Electronic Funds Transfer (EFT) payment:

Account Name:	Phone:
BSB No:	Account No:
Email for remittance advice:	

Property Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_