Application for variation to water restriction

Use this form to apply for a variation to Council’s water restrictions. Council’s watering hours are from 3.00 p.m. to 10.00 a.m.

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| **Applicant Details** |
|  |
| **Surname** |  | **Given Name** |
|       |  |       |
|  |
| **Postal Address** |
|       |
|  |
| **Email** |
|       |
|  |
| **Daytime Contact Number** |  | **Mobile Number** |  | **Fax Number** |
|       |  |       |  |       |

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| **Property Details** |
|  |
| **Address** |  | **Lot Number** |  | **Plan Number** |
|       |  |       |  |       |
|  |
| **Property Use** |
|       |

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| **Details of Variation** |
|  |
| **How do you want the restriction to be varied?** |
|       |
|  |
| **Why do you want the restriction to be varied?** |
|       |

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| **Declaration** |
|  |
| I acknowledge that if this application is approved, any departure by me from the conditions of approval will result in cancellation of this approval.I also acknowledge that I will not depart from the advertised restrictions until this application hs been approved. |
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| **Signature** |  | **Date** |
|  |  |       |

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| **Lodgement of your application** |
|  |
| MAIL | Post to ‘PO Box 191, Barcaldine QLD 4725’or fax to 07 4651 1778 |
|  |
| IN PERSON | Visit any BRC Administration Office from 8.00am to 4.30pm Monday to Friday | AlphaAramacBarcaldine | 43 Dryden Street 35 Gordon Street71 Ash Street  |

**OFFICE USE ONLY**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Receiving Officer |       | Date received |       | [ ]  Approved | [ ]  Not approved |
| Authorised by |       | Signed  |  | Letter sent |       |
| Permit number |       | Issued by |       | Issue date |       |