## **Licenced Gates and Grids Application**

This form is to be completed for the installation of Gates or Grids across a road (including renewal).

If you have any specific enquiries regarding how to complete this form, please contact Winton Shire Council. Please complete all sections, where applicable, on this form.

<b>Applicant Details</b>					
Surname				Given Name	
Postal Address					
Phone Number				Business Phone	
Email Address					
Gate / Grid Details					
Name of Owner(s)					
Name of Road the Gate/Grid to be installed on					
Chainage (Location)					Leave black if unknown
Is this Replacing a-	Gate Grid	□ Yes	□ No		
Does the Proposed	Gate or	Grid confo	rm to Cou	ıncil's Standa	rd Design?
□ Yes □ No					3
If No, please provide a palignment, structural ele	olan detailir ements and	ng the design structural ce	of the prop	oosed Grid or Ga	ate, including dimensions,
Grid Dimensions	1				
if applicable					
Materials to be used					
Grid Abutments					



**Phone** 07 4657 2666 **Address** PO Box 288, Winton, QLD, 4735

	WINTON SHIRE COUNCIL				
Grid Frame, Rails etc					
Gates					
Checklist					
I have a copy of the f	ollowing documents to attach to this application form:				
$\square$ A plan detailing the design of the proposed Gate or Grid (if it does not conform to Council's Standard Grid Design) – including dimensions, alignment, structural elements and structural certificate.					
☐ A plan showing	g the location within the public road of the proposed Gate or Grid.				
☐ Details of all we erected.	arning or similar signage proposed or required (by the Local Law) to be				
Declaration					
By signing this form, I acknowledge that I have completed all sections of this form and attached all appropriate documents.					
Applicant Signature	Date				
Owner Signature	Date				
Owner Signature	Date				

